



Digitized by the Internet Archive
in 2014

<https://archive.org/details/b19974760M5853>

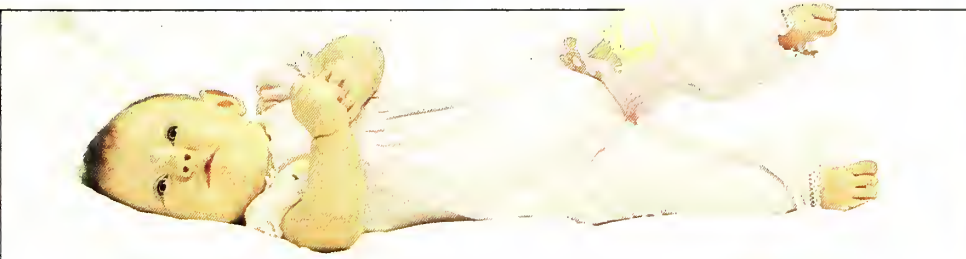
CHEMIST & DRUGGIST

the newsweekly for pharmacy

March 19, 1988



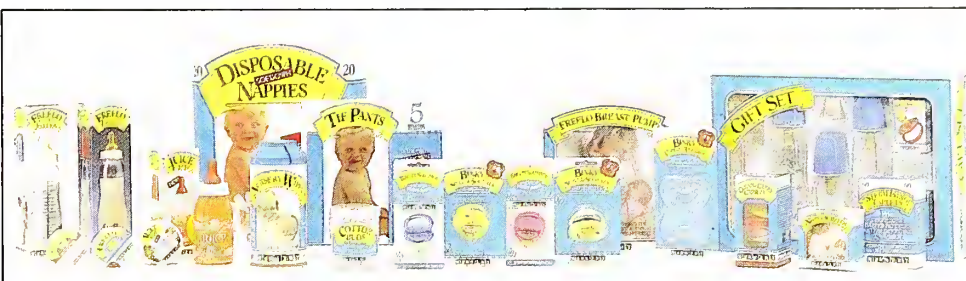
THIS LITTLE BABY'S ON THE BOTTLE.



THIS LITTLE BABY'S ON THE BREAST.



THIS LITTLE BABY DOES IT BOTH WAYS.



BUT MUM KNOWS NURSERY IS BEST.

The fact is, whether a mother chooses to breastfeed or bottlefeed, there's a product in the Nurseries range to help her. From breast pumps and nipple shields to the new shaped feeder and teat. (The next best thing to breastfeeding). There's never been a better time to stock Nurseries. Whole page consumer advertisements are putting mums in the picture. So when they come to choose, naturally they'll choose what's best for them.

NURSERIES

Giving mother and baby the best of both worlds.

For further details contact Customer Services, Lewis Woolf Greetings Limited, 144 Oakfield Road, Selly Oak, Birmingham B29 7EE Telephone 021-414 1122

Council makes decision on supervision

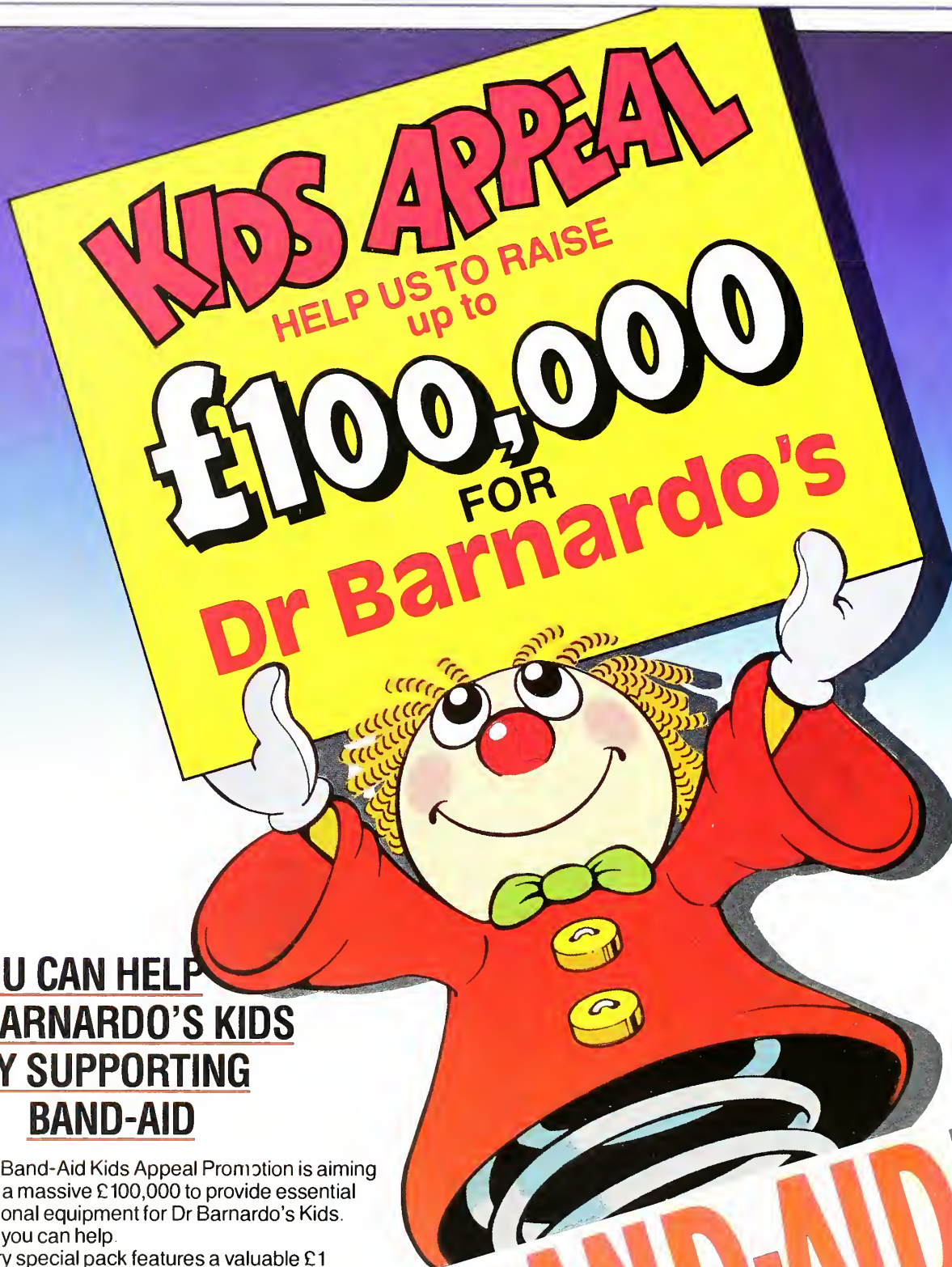
Boots take legal action on minor relocations

PSNC optimistic on April pay deal

PSNI retention fee up to £50

EEC ideas swapped in Nice

Touche Ross to review generic market for DHSS



YOU CAN HELP
Dr BARNARDO'S KIDS
BY SUPPORTING
BAND-AID

The Band-Aid Kids Appeal Promotion is aiming to raise a massive £100,000 to provide essential recreational equipment for Dr Barnardo's Kids.

And you can help.

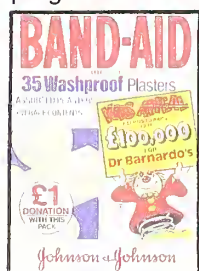
Every special pack features a valuable £1 token for your customers to donate to the Band-Aid Kids Appeal. So, with your backing we can help Dr Barnardo's handicapped children.

We're promoting the Kids Appeal with a programme of exciting nationwide PR events, to coincide with Dr Barnardo's own high profile fund raising activity during March.

So join us now.

Support the Band-Aid Kids Appeal and help Dr Barnardo's.

You and Band-Aid sticking together for Dr Barnardo's



BAND-AID
BRAND

Editor: John Skelton, BPharm, MPS**Assistant Editor:** Patrick Grice,
BPharm, MPS**Features Editor:** Steven Titmarsh,
BPharm, MPS**News Editor:** Robert Darracott,
BPharm, MPS**Contributing Editor:** Adrienne de Mont
BPharm, MPS**Beauty Editor:** Frances Quinn, BA**Business Editor:** Jenny Filder, BA**Art Editor:** Jonathan Bobbett**Price List Controller:** Colin Simpson**Advertisement Manager:** Richard
Langrish**Assistant Advertisement Manager:**

Doug Mytton

Production: Shirley Wilson**Publisher:** Ronald Salmon, FPS**Director:** Christopher

Leonard-Morgan

**Published Saturdays by Benn
Publications Ltd, Sovereign Way,
Tonbridge, Kent TN9 1RW**
Telephone: 0732 364422
Telex: 95132 Benton G
Facsimile: 0732 361534**Benn**
**Subscriptions:** Home £63 per annum.
Overseas & Eire £78 per annum including
postage. £1.30 per copy
(postage extra).Member of the Audit
Bureau of Circulations**ABC****Regional advertisement offices:**
Midlands: 240-244 Stratford Road, Shirley,
Sohihull, W. Midlands B90 3AE 021-744
4427. North East and North West: Graeme
House, Chorlton Place, Wilbraham Road,
Manchester M21 1AQ. 061-881 0112.
West Country & South Wales: 10
Badminton Road, Downend, Bristol BS16
6BQ 0272 564827.

MARCH 19, 1988

IN THIS ISSUE

VOLUME 229 NO 5616

ISSN 0009-3033

Boots the Chemist take action on minor relocations

520

Judicial review requested on three cases

PSNC optimism follows fresh pay talks

521

April 1 negotiating deadline prompts action

Generics market under review

523

DHSS calls in Touche Ross

BPC programme for Aberdeen

523

PSGB release Conference timetable

PSNI retention fee goes up . . .

524

. . . to £50 — a 25 per cent increase

EEC pharmacy symposium

543

Free-movers go to Nice

Council makes decision on supervision

544

Status quo on personal control

The Budget at a glance

552

The pharmacy perspective

Macarthy v Unichem

553

A broker's view of the contest

REGULARS

Comment	519
Topical Reflections	527
Prescription specialities	529
Counterpoints	530
OTC update	547
Letters	551
Business news	552
Classified advertisements	556
People	558

COMMENT

April 1, with all that it signifies financially and otherwise, is coming around once again. And after a year which has been notable for a near total lack of contact between the PSNC and the DHSS, the latter has let it be known that it wants this year's remuneration package finalised by the end of the month! The contractors' negotiating team spent Monday at the Department offices, in the first plenary meeting since last March. And although PSNC chairman David Sharpe is saying nothing about what was offered, he seems optimistic that an interim package could be agreed by April 1.

Bearing in mind that neither side had put any proposals for discussion prior to Monday, it is worth reviewing what is on the table. In the current climate it is not surprising to hear that the DHSS, no doubt under Treasury pressure, is baulking at paying the £36m a year that the labour and overhead costs inquiry showed contractors are owed. Then there are the inconclusive results of the Pharmacy Review Panel's report on profit. Presumably the Department will be quick to pounce on the £20m that will come from reducing the pure profit by 1 per cent. But it will be well into next year before the results of the inquiries

which are also recommended, and may redress the balance, are known. There are number of other moves the DHSS could make to reduce its debt to contractors. The most obvious of these is a stockholding inquiry, which PSNC will find hard to refuse because one is due.

An increase in discount clawback to take account of parallel imports has been mentioned a number of times recently by health ministers. While PSNC might threaten legal action against any move to make the clawback retrospective, the Department could impose a prospective clawback — and since it says it is impossible to do it selectively, the clawback will be across the board. More alarming are persistent rumblings that there are still too many pharmacies. The new contract is slowly reducing the numbers but not fast enough for some, it appears. The Department's stock response to this situation is to force the least profitable pharmacies out of NHS dispensing by raising the script cut-off level.

Although an interim agreement may be in place by April 1, it is unlikely that the labour costs and the profit formula issues will have been resolved. It is to be hoped they will be in time for the next LPC meeting in June.

Boots go to court over 'minor relocation'

Boots are seeking a judicial review of the minor relocation procedures of the new contract after Durham and Cumbria FPCs turned down three applications, and refused the company the opportunity to appeal against the decisions.

In a statement this week Boots say they are applying to the High Court for orders of judicial review against the two FPCs relating to the right of appeal against the decisions on minor relocation.

Boots say they have had pharmacies in Peterlee, Co Durham, and in Keswick and Windermere, Cumbria, for many years. In each of the towns they wish to move to nearby larger premises "to enable them to provide customers with a more extensive range of goods and better facilities".

The company goes on to say it believes "that all three applications should have been granted on the grounds that they are clearly 'minor relocations'". Both Cumbria and Durham FPCs have refused to grant the applications and have furthermore refused the company the opportunity of appealing against their decisions. Boots believe the Regulations give such a right of appeal.

Boots are asking the High Court to either order the FPCs to hear their appeals or alternatively, to quash the decisions that the proposed moves are not minor relocations under the Regulations.

Mr E. Henderson, assistant administrator of Cumbria FPC, says the bone of contention is that Boots consider that if a pharmacy practice subcommittee decides that a proposed move is not a minor relocation, they should have a right of appeal against that decision. "We feel that in such a case the rules do not allow an appeal," he said. Both cases are still under PPSC consideration but

not as minor relocations.

In the DHSS guidelines on minor relocations FPCs are advised to consider whether the population served in the new location is essentially the same as that served in the existing location; and whether any existing contractor would suffer significant detriment to an extent which would prejudice his continuing ability to provide NHS services.

However, it must be remembered that this is only the interpretation placed on the actual Regulations by the DHSS, and it is that the latter are being challenged. The same guidelines say that an aggrieved party can

appeal against a minor relocation application that is granted. There is no mention in the guidelines for an appeal by the applicant. Boots believe this interpretation is incorrect.

PSNC points out that the minor relocation procedure allows a "fast lane" for processing applications. Having a full appeals procedure is likely to negate this, officials suggest. The National Pharmaceutical Association has recently expressed concern at instances where relocation of pharmacies has been allowed or disallowed as "minor" in similar circumstances, due to differing interpretation of the Regulations.

PSNC constitutional

The working party on the PSNC's constitution is due to report in May, but LPCs will not be consulted until later in the year.

First to be approached over any proposed changes will be the bodies who have representatives on PSNC: the Company Chemists Association and the National Pharmaceutical Association. LPCs will be asked for their opinions in September.

The final report will be considered in January 1989 and any intended changes put to a delegates meeting.

■ PSNC has joined other groups in saying that the inclusion of the manufacturer's name and the site of a product's manufacture on dispensing labels is impractical. Where there is a bulk pack PSNC suggest sticky labels are supplied for a dispensed product.

Review Panel report 'a major disappointment'

The Pharmacy Review Panel's report on profit is a major disappointment. It introduces further complexity into an already unwieldy system and raises further problems without solving any, says PSNC financial executive Mike Brining in a briefing to committee members.

The Panel has recommended a reduction in pure profit by 1 per cent for 1988-89, and a new formula for 1989-90 based on:

a) The actual capital employed split in ratio of own capital to outside loans, with the following rates of return to be applied:

Outside loans — actual average rate of interest charged by the high street banks

Own funds — interest rate for outside loans plus a negotiated additional percentage

b) An additional element to be negotiated and expressed as a percentage of value added (ie

costs excluding NIC).

The accrued balance sheet underpayment at March 31, 1989 will be reduced by the 1 per cent reduction in pure profit as follows:

Previous forecast underpayment £90m-94m less 1 per cent reduction in pure profit £21m

Revised forecast underpayment at March 31, 1989 £69m-73m

Implementation of the new formula for 1989-90 will require

agreement on a range of inquiries into: various elements of capital employed including a number not currently included (eg goodwill, head office fixed assets, warehouse and distribution fixed and current assets); interest rates charged by outside lenders on secured/unsecured loans. "It is open to doubt whether such a programme could be completed in time for negotiations in January 1989," says Mr Brining.

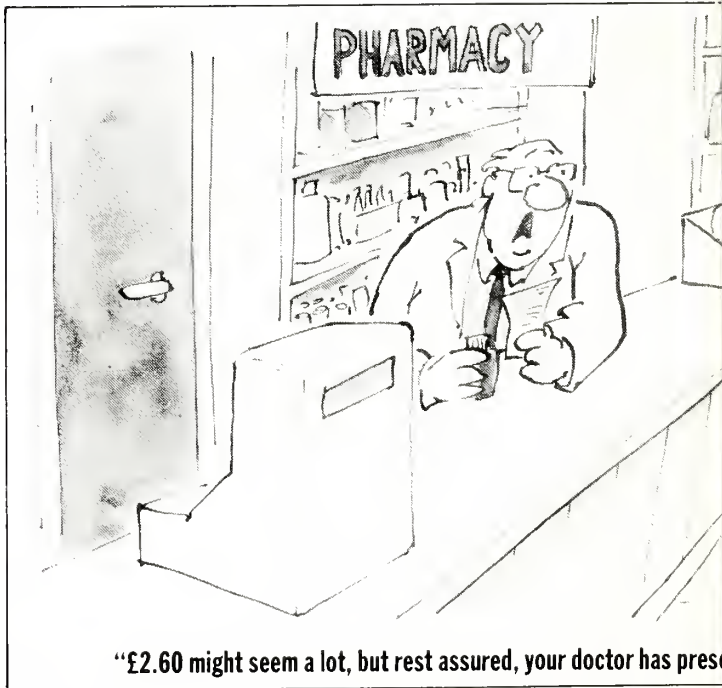
25 per cent of people have skin problems

A new Family Doctor booklet on common skin problems says a surprising number of people have trouble with their skin. One study put the figure as high as 25 per cent, say the authors, Drs Colver and Savin, and they account for up

to 10 per cent of visits to GPs.

The booklet reviews acne, eczema, psoriasis, and other disorders, and comments on developments in treatments.

Common Skin Problems is available through the NPA.



DHSS wants pay talks finished by April

PSNC officials had their first full negotiating meeting with the Department of Health this financial year on Monday. Although no proposals had been tabled by either side, the DHSS had told PSNC it wished to conclude remuneration negotiations by the end of the month.

PSNC chairman David Sharpe would not comment on Monday's talks, other than to say: "A package offer has been made by the DHSS which we will convey to the Committee on March 23. We will be seeing the Department again on March 25 when I would hope we can conclude an interim package. I would like to think with goodwill on both sides we can get a package together for April 1."

However, it is likely several major items will remain outstanding. "We are in a more fluid situation than I have so far experienced in my nine years as PSNC chairman," said Mr Sharpe. "Enormous sums of

money are involved — up to £100m on either side." Monday was the first time the two sides have met to consider both the outcome of the labour and overhead costs inquiry and the long awaited report of the Pharmacy Review Panel.

The costs inquiry showed contractors should be getting an extra 10p per script, or £36m a year. The increase, under normal circumstances, would apply not only to the 1988-89 financial year, but also be backdated to April 1987. However PSNC fears the Department is considering setting aside the results of the inquiry (*C&D* last week, p469) and has said any such move would be an attack on the cost plus basis of the contract. The results of the inquiry have always been implemented in the past.

The Review Panel's report has recommended a reduction in pure profit by 1 per cent which would take £20m out of the global sum, but still leave the accrued

forecast balance sheet underpayment at March 31, 1989 of £69m to £73m. The Panel's recommendations are not binding, however.

The lack of contact between PSNC and DHSS, occurring after staff changes at the Department, has been strongly criticised by Mr Sharpe. "We are surprised at the Department's apparent need to finalise all negotiations by the end of March when during the past 12 months we had had only one plenary meeting, and that was to discuss the White Paper on Primary Health Care. We have had no negotiating meeting. PSNC officials have had less than a handful of meetings with DHSS officials. As a consequence, and with so much at stake, we find it difficult to believe it will be possible to finalise negotiations before the end of the month. We have had no indication of the Department's intentions. We deprecate this lack of contact," said Mr Sharpe last week.

Legal moves on anxiolytics

As *Chemist & Druggist* went to Press on Wednesday solicitors representing people who claim to have suffered because they took tranquillisers met at the Law Society in London to work out how best to proceed.

Paul Balen from Nottingham solicitors Freeth, Cartwright and Sketchley, who is helping co-ordinate the solicitors involved, told *C&D* that the meeting had been called by the Law Society and would be used to decide whether it is worth setting up a steering committee to co-ordinate claims.

More than 100 firms of solicitors have instructions from clients claiming to have suffered ill effects after taking benzodiazepines. The possible legal action against manufacturers that could arise from the claims is being billed by the solicitors as the biggest ever case against drug side effects.

Mr Balen said the potential number of claims is enormous if information coming through is accurate. But things are at such an early stage that it was not possible to say how many such instances there might be.

Damages awarded against GP and pharmacist

A badly-written medical prescription led to a £139,147 High Court damages award on Wednesday against the doctor who wrote it and a pharmacist who

dispensed the wrong drug to the patient.

The award went to former building worker James Prendergast, 59, of Coningham Road, Shepherds Bush, West London, victim of irreversible brain damage after taking a drug meant for diabetics instead of the antibiotic prescribed by his GP for a chest infection.

Mr Justice Auld held that Dr Stuart Miller was 25 per cent to blame because of his bad handwriting on the prescription. Pharmacist Peter Kozary and former chemist shop owners Sam and Dee Ltd, of which he was a director, were 75 per cent liable.

The Judge said the greater responsibility for the tragedy lay with Mr Kozary, who was "simply not paying attention to what he was doing," when he misread the prescription. Dr Miller had fallen below the reasonable standard of care expected of him when he wrote the name of the drug.

"Mr Kozary's negligence was triggered by Dr Miller's bad writing," he said. The Court heard that Mr Prendergast went into a coma and spent five months

in hospital after taking the drug. He is now unemployable, with poor short-term memory and blunted intellect. He needs regular care and is unable to run his day-to-day affairs. He leads a lonely and limited life.

The Judge said Mr Prendergast, a "quiet, considerate bachelor," went to Dr Miller in December 1983 to get his regular medication for asthma — inhalers and some tablets. He was also prescribed Amoxil, for a cold. When he took the prescription to the chemist's shop near Dr Miller's surgery in Uxbridge Road, Shepherds Bush, Mr Kozary misread the drug name as Daonil, which reduced the sugar content in the blood and could be dangerous if taken by non-diabetics and not counteracted in time.

In his defence, Mr Kozary claimed that he phoned the doctor to check the prescription and that the man who came to collect the drugs was Mr Prendergast's brother. He claimed he warned the man about the dangers of Mr Prendergast taking Daonil.

But the judge said he found Mr Kozary's explanation "highly

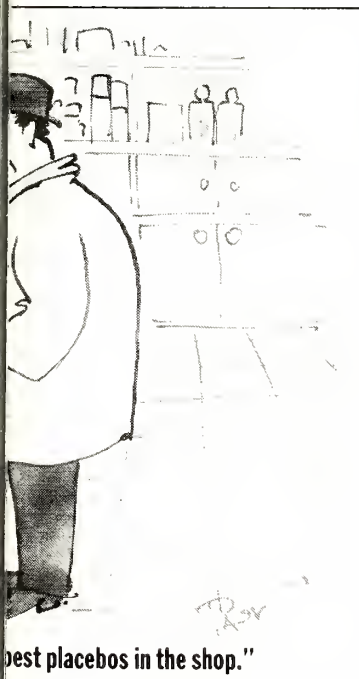
suspect". It had been "made up". Even assuming that the prescription was unclear, Mr Kozary should have been alerted to the fact that Daonil was being recommended in the wrong dosage and quantity. He should also have noticed that the man who collected the drugs did not claim exemption from paying for the Daonil — which was free to diabetics.

It was not enough for a pharmacist blindly to dispense drugs without giving thought to what he was doing.

Dr Miller had produced witnesses who claimed to have read the prescription without any difficulty, but the Judge said that was not his general impression.

"It's my firm view that the word Amoxil could have been read as Daonil and could reasonably have been read so by Mr Kozary, subject to the qualification of the other aspects of the prescription that should have put him on inquiry if he had been paying attention," said the Judge.

There was a real risk of misinterpretation of prescriptions and very serious consequences if they were not written clearly.



An important announcement from Cow and Gate.

Cow and Gate announce that Fortify, our liquid meal replacement brand, is being discontinued with immediate effect, due to lack of significant sales volumes.

We thank you for the support you have shown Fortify since its launch.

We are now inviting you to claim credit for any quantities of Fortify you may still be stocking. Simply fill in the coupon at the foot of the page and return it, together with the plastic reclosure (lid) and top (the card and foil part stamped "Pull here to open") of each 440g and 132g cekakan to the address below. In addition please destroy the contents and body of the cekacans.

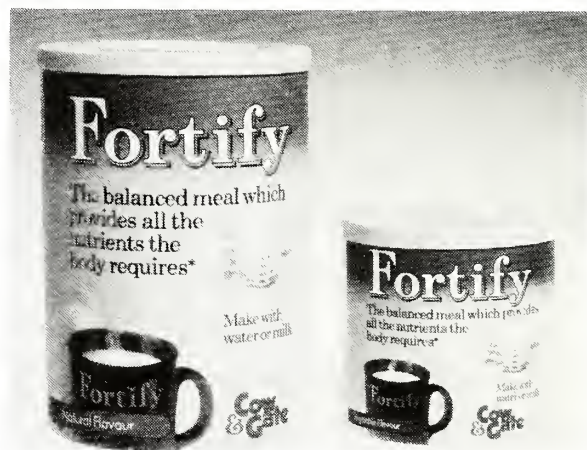
All products will be credited at ex Wholesale rate minus any previously issued discount.

Cheques will be despatched as quickly as possible. Please allow 28 days for handling.

In order to qualify for credit, we must receive coupons and proofs of purchase no later than May 20th, 1988.

We would like to assure you that we will deal with all refunds as quickly and efficiently as possible. If you require any further information, please call us on 02214 68381 Ext 3117 and we will do our utmost to answer any enquiries you may have.

Once again, thank you for your cooperation.



Please enclose both the reclosure and top of the cekakan for each can claimed.

Number of Natural 440g – cans claimed

Flavoured 132g – cans claimed

(NB. A reclosure and top of cekakan must be supplied for each can claimed. Refunds will only be made when both items have been returned.)

Name

Address

Telephone Number

Please send to Fortify Returns, Freepost BU279, Burnley, Lancashire BB1 1ZA by the 20th May 1988.

Touche Ross to investigate generic drug market

As part of its review of policy on the NHS, the Government is to consider the scope for expanding the use of generic drugs.

This emerged with the announcement by Mr John Moore, the Social Services Secretary, that Touche Ross Management Consultants have been asked to complete a report within six months on the market for generic medicines in Great Britain. They have been asked to examine the extent of competition in supplies to hospitals and pharmacies, the prices paid and the effectiveness of the systems for determining those prices.

Mr Moore told Mr S. Coombes (Con) that the content of the report necessarily will be confidential because of the commercial contents.

The full terms of reference are:

1. To study the market for generic medicines in Great Britain with particular reference to: (a) the extent of competition in the supply of generic medicines; (b) the similarities and differences between the ways in which generic medicines are procured by and distributed to (i) NHS hospitals (ii) Family Practitioner Services contractors (retail pharmacists and dispensing doctors); (c) the prices paid for generic medicines by (i) NHS hospitals (ii) FPS contractors, and the reasons for any differences in those prices; (d) the effectiveness of the system for setting prices for generic medicines in the Drug Tariffs and recovery of any differences between the Drug Tariff price and the price actually paid, noting that the system in Scotland differs in certain respects from that in England and Wales; (e) the relationship between the prices of generic medicines and the extent to which UK and other manufacturers can enter and remain in the market.

2. In the light of the above; (a) to put forward if possible proposals for improving the arrangements for the procurement, distribution and pricing of generic medicines, with particular reference to FPS contractors which (i) are compatible with our international trading obligations (including EEC and GATT) and the independent contractor status of retail pharmacists and dispensing doctors, (ii) take account of the range of ownership and management in retail pharmacy

and the nature and level of involvement of wholesalers, (iii) would stimulate further competition, (iv) would ensure the availability of generic medicines at reimbursable prices throughout Great Britain, (v) would lead to reductions in the cost of medicines to the NHS as a whole, (vi) would ideally also further encourage the prescribing of generic medicines, where appropriate. (b) to assess the effect of any proposals on UK and other manufacturers of

generic medicines; (c) to report within six months.

□ The Government has no plans to reimburse pharmacists for generics on the actual prices paid, rather than through an averaging system. In a Parliamentary answer to John Townend (Con), the Health Minister Tony Newton said that reimbursement on prices paid would remove the incentives to purchase as economically as possible as is consistent with good dispensing practice.



Radio 2 disc jockeys Adrian Love presents Cary Spink of the British Heart Foundation with a cheque for £500 from Leo Laboratories. Leo sponsored 60-a-day Adrian to give up smoking for National No Smoking Day.

From generics to brands?

Generic products will soon be as readily identifiable as branded proprietaries as a result of the Consumer Protection Act which came into effect on March 1, PSNC chief executive Alan Smith told a Wellcome seminar at Gleneagles last weekend.

He also recommended that if pharmacists did not want to keep records of their invoices they should put the manufacturer's name on any dispensed medicine and use OPs where possible. He also suggested an annual contract for generics with one supplier. Many wholesalers will keep every invoice for ten years, he said.

There were a lot of legal grey areas in the new Act, said Mr Smith. The Department of Trade has stated that by merely affixing a label to a dispensed medicine the pharmacist will not be deemed the producer, but only time and the courts will finally determine this. It is essential for dispensed products to be removed from the "anonymous" exemptions clause to the strict liability section.

The principle that strict liability should lie with the manufacturer is because "he is the person best able to regulate the quality of the product" and "a commercial producer who has promoted his product should accept legal responsibilities for the defects in it and can most conveniently insure against it".

BPC Aberdeen 1988

The provisional programme for the 125th British Pharmaceutical Conference will be held at the University of Aberdeen from Wednesday, September 14 to Saturday, September 17, has now been released.

The opening ceremony will be held on the morning of September 14, in the Music Hall, Aberdeen. Speakers include the Lord Provost of Aberdeen, the president of the Pharmaceutical Society and Professor J.M. Midgeley, Conference science chairman.

The First Professional Session in the afternoon will be a "topical issues forum" with topics and speakers to be announced later.

On Thursday, the Second Professional Session splits into two; on the community pharmacy side, Liverpool pharmacist Jeremy Clitherow, Mrs B. Taylor, staff pharmacist at King's College Hospital, and Ian Mullen, chairman of the Pharmaceutical

General Council (Scotland), will address "The extended role of the pharmacist," while in the industrial pharmacists session, "The pharmaceutical industry: contributions to the economy and the nation's health" will be discussed by Dr M. Carter, medical director, ICI Pharmaceuticals, Professor M.D. Rawlings of the University of Newcastle-upon-Tyne and Dr P.R. Read, director, Hoechst UK. In the afternoon, papers presented to the Pharmacy Practice Research Session will compete for the *Chemist & Druggist* medal.

On Friday, September 16, the Third Professional Session will look at "Professional independence — an anachronism of the 1990s?" with speakers Sir David Napley and Mr Maurice Healy, director of the National Consumer Council. In the afternoon, Mr Alistair Lloyd, registrar of the Pharmacy Board

of Australia, addresses the History of Pharmacy Session.

The final day means the Symposium Session in the morning. This year the theme is "The Medicines Act 1968: has it benefitted the patient?" with a panel comprised of PSGB Council Member Colin Hitchings, Mr Ron Wing of Sanofi Ltd, and Mr P. Nilsson from the DHSS.

Finally, the afternoon's Conference Lecture sees Professor Alan Maynard, director of the Centre for Health Economics at the University of York look at "Defining health outcome: are 'quality adjusted life years' the answer?"

Science sessions run for the first three days, as does the Conference exhibition.

A Civic Reception is planned for the Wednesday, the Conference Banquet takes place in Old Aberdeen on the Thursday, and the Conference Ball is on the Saturday.

PSNI retention fee up to £50

The retention fee for pharmacists in Northern Ireland will be going up to £50 in June. A copy of the draft General Regulations of the Society, which will take effect on June 1, were circulated at the February meeting of the Council of the Pharmaceutical Society of Northern Ireland. The regulations also include the health and character conditions for registration as a pharmacist now required as a result of EEC free movement legislation.

The secretary noted receipt of a letter from the Pharmaceutical Society of Great Britain advising that from March 1, following a change in the Society's Byelaws, all persons seeking registration in Great Britain as pharmacists would not have to provide a "health certificate" before registration could take place.

Dr Lesley Anderson reported that at a recent meeting of the Education Committee it had been agreed to hold a course for first-time tutors on Wednesday April 20. Dr Anderson also outlined a proposed symposium which will be held on June 26 at Queen's Elms Halls of Residence, Queen's University of Belfast, Malone Road, Belfast (see also p554). The following applications for registration as students were approved:-

Jayne Alexandra Agnew, 44 Tullyhenan Road, Banbridge.

Winston Linden Ashfield, 67 Knockanroe Road, Ardrea, Stewartstown, co Tyrone.

Eileen Bridget Bonner, Gillyholme, Springfield, Enniskillen, co Fermanagh.

Tracey Jane Boyce, 15 Clonmore Park, Harmony Hill, Lisburn BT27 4EU.

Liam Martin Bradley, Lisnafin, Newtownstewart, Omagh, co Tyrone.

Sharon Breedge Diamond, 124 Mullaghboy Road, Bellaghy, co Londonderry.

Margaret Morag Fiona Dalglish, 22 Pinegrove Crescent, Grove Road, Ballymena, co Antrim.

Gerard Francis Greene, Aisling, 36 Carrigart, Craigavon, co Armagh BT65 5BU.

Stephen Robert Houston, 12 Bockets Road, Ballygawley, co Tyrone.



Recipients of the Abbott travel fellowship awards for AIDS research are pictured with presenter Dr Edward Harris, DHSS deputy chief medical officer. The awards are to enable people to make fact-finding visits to the United States. Front row from left to right: Dr Harris; Dr Pamela Gillies, lecturer at Nottingham medical school; Dr Yasmin Battiwala, Drug Abuse Research Team, London; Dr Richard Holliman, assistant medical microbiologist, St George's Hospital, Tooting; Mr David Gibbons, chairman and managing director, Abbott Laboratories. Back row from left to right: Mr Peter Mason, senior nurse, Cambridge Health Authority; Mr Robert Bor, senior clinical psychologist/AIDS counsellor, Royal Free Hospital, Hampstead; Mr David Hall, county manager, Abbott Diagnostics Division and Mr Paul Yago, clinical psychologist, Prestwich Hospital, Manchester

Joanne Ireland, 4 Tudor Avenue, Belfast BT6 9LR

Margaret Rosemary Kerr, 57 Old Galgorm Road, Ballymena

Karen Roberta Kilgore, 12 Newlands Crescent, Portstewart, co Londonderry BT55 7JJ

Wendy McAuley, 126 Katebridge Road, Ballyrone, Banbridge, co Down BT32 5AA

Joanne Marie McDermott, 11 Mullinure Park, Armagh BT61 9ES

Oonagh Mary McGrath, 119 Malone Avenue, Belfast BT9 6EQ

Maureen Teresa McKeever, 15 Lurganmore Road, Ballygawley co Tyrone BT70 2JB.

The following applications for restoration to the register of Pharmaceutical Chemists of Northern Ireland were granted: Allister Gordon Heslip, 22 Brae Road, Newry, co Down

Robert McGrath, Biochemistry Department, Witwatersrand University, PO Wits 2050 Johannesburg, South Africa.

The application of Miss Heather Helen Trueick, 50 Cotton Hill, Withington, Manchester M20 9VR, for registration under the reciprocal agreement which exists between the Great Britain and Northern Ireland Societies was approved.

The National Pharmaceutical Association has appointed a new agent to promote the sale of "green cross signs" for shop fronts. The Council were asked by the PSGB (who hold the licence) whether it was agreeable to the sign being promoted in the Province. The Council agreed it would be advantageous to use the same sign to identify pharmacies throughout the UK. Pharmacists wishing to purchase a sign should in the first instance contact the NPA in St Albans, Herts.

Unichem make it for Link users

Unichem have announced that they are able to take orders from pharmacists with Link computers.

The facility was introduced by Unichem on March 1 and is already being used by over 100 pharmacists, says Unichem management services director David Walker. "We have been keeping it under wraps until we were quite sure the system was bug free," he said. He intimated the move was a result of the of new accounts Unichem have gained since announcing their proposed share flotation scheme.

The cost for Link users wishing to order from Unichem will be £15 a month, to cover connection and service charges. Users will have to use Prosper codes and will be entitled to the full additional profit share due to Prosper customers. It will also allow Vestric customers who use Unichem as a second line wholesaler to use one terminal.

ASA reports

An advertisement for NUK teats has been found to be "not completely accurate" in its representation of breastfeeding. An objection was made to the advertisement which compared a baby suckling a NUK teat with breastfeeding. The Advertising Standards Authority noted that while the representations were only diagrammatic, it would be helpful for the illustration of breastfeeding to be amended.

An advertisement for Wander

Ltd, that said "no wonder the continentals only need a roll for breakfast" and claimed "Ovaltine contains no added sugar" was objected to, since it does contain glucose syrup. The Authority found the advertisement to be at fault for not making clear the basis of the claim.

The Authority upheld a complaint about an advertisement for a "green card" system, that showed holders were free from AIDS. The Authority found that it was incorrect for London Medical Laboratories to suggest that there was an "AIDS test", since the test was for the presence of antibodies to HIV virus. The Authority was concerned that the advertisement could "encourage a false sense of security" and "create a dangerous situation".

Complaints about claims for "anti AIDS products" were upheld. The disinfectants and cleaners from Clean Aid Plus Ltd contain nonoxynol-9 which has been shown to inactivate the HIV virus. However, the advertisers did not provide the Authority with tests to show the efficacy of their formulations in use in the situations claimed.

To ad or not to ad?

Solicitors and pharmacists attitudes to advertising are similar, according to NPA public relations officer Tanya Turton — both are reluctant to do so because they feel it is "unprofessional".

However, she says, the Law Society has advanced much further than the Pharmaceutical Society in lifting restrictions on advertising. "Solicitors have only three strict 'Don't's' left":

1. Solicitors cannot claim to be "specialists" in any particular field. The reasoning behind this regulation is that the Law Society cannot check on the validity of the claim. It has specialist panels and only members accredited to these can claim specialist status.

2. No "knocking" copy is allowed. A solicitor can state that his service is the "speediest" but he cannot add "in Ipswich", because then he is comparing himself with his colleagues in that town.

3. No "cold calling" is permitted — that is, there must be an inquiry beforehand.

Mrs Turton says solicitors' attitudes to advertising are changing. "Of the 48,000 solicitors, about half are under the age of 35, and the 3,000 new solicitors joining the Law Society yearly are less reluctant to use the media.

THE INVENTORS OF ASPIRIN ARE ABOUT TO GIVE HOUSEHOLD CLEANER MANUFACTURERS A HEADACHE.

It's a happy coincidence that the new cleaning range from Bayer is called SOS.

It will certainly start alarm bells ringing with many of our rivals. SOS products are designed for people who have better things to do with their time than cleaning.

Our SOS general purpose liquid and spray cleaners have a remarkable new formulation that will knock spots off most cleaners on the market.

They clean quickly and effectively, while also killing germs.

Bayer scientists developed a glass cleaner formulation that was also clearly superior.

SOS Glass Works contains natural vinegar. It ensures totally streak-free glass and mirrors with a minimum of elbow grease.

Our SOS oven pad is the most powerful you can buy, yet there's nothing strong about its smell. It's the first oven cleaner on the



market that cleans effectively with no fumes.

The advertising for the SOS range is as revolutionary as the products.

Without giving too much away, you won't see any SOS commercials with two housewives in a kitchen rapturously discussing the virtues of our products. And we're spending a tidy sum promoting this new cleaning range.

Our £3.5 million launch campaign includes heavyweight television advertising and a national coupon drop.

Contact Bayer UK Limited, Bayer House, Strawberry Hill,

Newbury, Berkshire RG13 1JA, tel:

(0635) 39000 for more details of the SOS range.

After all, when we invented a better pain killer, it became world famous. Now we've invented better cleaning products, we expect similar results.



NEXT GENERATION CLEANERS.





You'll like the changes they've made.



Your patients will like the changes we've made.

Compression hosiery seems a complicated and confusing area, which often makes prescribing difficult for GP's. And that can mean a lot of extra time and effort for you. Well, now there's some good news. From April, the compression hosiery section of the Drug Tariff is being completely changed.


The changes mean simpler, clearer prescriptions from GP's. And quicker, easier dispensing for you.

It also means improved compliance by your patients. Because the changes have enabled Scholl, using the latest materials and machine technology, to introduce a remarkable new range of graduated compression hosiery.

On sheer performance, we're confident they will raise a few eyebrows. For sheer looks, we're certain they will turn a few heads.



THE LEADING NAME IN COMPRESSION HOSIERY



To get your Scholl dispensing guide, together with a complimentary tape measure, measuring chart and professional samples of the new Scholl range, simply complete and return this coupon to Scholl Consumer Products Limited, FREEPOST, 182-204 St John Street, London EC1B 1QB

Name _____

Address _____

Companies should enter herbal drug market

Pharmaceutical companies in the West could form joint ventures with Third World producers of herbal remedies, suggests a report published this week.

Western companies can either fight a rearguard action to defend their traditional approach to drug innovation and use their superior resources to stifle competition from plant-based remedies, or they can have the foresight to go with the trend to herbal medicine, say management consultants McAlpine, Thorpe and Warrier Ltd. Herbal products should be seen as complementary to existing medicines rather than in direct competition, and such a strategy could enhance the image of many pharmaceutical companies among consumers, the report suggests.

Companies should choose the ethical drug market as the priority for introduction of herbal remedies; although it may be a harder route, the market is much larger and offers greater long term stability. The multinationals, with support of the World Health Organisation and Third World governments, could bring pressure on Western governments to accept multi-ingredient herbal drugs on the basis of safety and efficacy evidence and to relax the requirement for details on the purpose of each ingredient. And regulatory authorities should be persuaded to allow clinical trials of herbal drugs in the West if safety in the Third World is long established. *McAlpine, Thorpe and Warrier Ltd. Tel: 01-370 2255/6.*

Shulton stop using CFCs

Shulton are reformulating their aerosol products because of recent fears over the connection between chlorofluorocarbon propellants and the hole in the ozone layer.

By the end of March all their deodorants, like their shaving foam aerosols, will be free of chlorofluorocarbons. Levels in remaining products will be reduced and formulations completely free of CFCs will be introduced later this year, says the company.

TOPICAL REFLECTIONS

by Krayser

Conditional reflex

Dennis Higgins, in a recent letter commented that even if the law did not require it I would most likely hurry back to my business after lunch because I would consider it proper to be there. Quite! But had the requirement never been laid on me, my attitude might now be quite different. We accepted the discipline as having justifiable force to support it. But without it — what then?



The rep season

It seems to be the season for reps...millions of them! Well not quite millions, but certainly tens this week. I don't know what I've done to deserve such attention. It must be the first harbinger of Spring. The sunglasses man was round, but I had a bad year 1987 and in the sort out discovered I still had enough to get me going. I'll probably pick up a small Polaroid or Croptics stand, say two or three dozen new items to top up and make an interesting display. And then came the various suntan boys and girls. They must spend hours under sunlamps to get their singularly unnatural colour. It looks sort of...muddy? Anyway it doesn't do anything for me. Sadly it didn't do anything for them either, because one look in the stockroom gave me the message I should sell what I'd got before "investing" in yet more!

The clever reps try to do me favours before we start talking about new stock, like asking to see my old, so they can uplift the grot and clean out any duff items. "Nice of you," I always say. "How kind, thank you." And it is. It's also sound tactics towards creating new sales. It generally works, if only because you are under some sort of implicit obligation having accepted the "gift". Who said the Eastern bazaar was outdated? The same techniques exactly!

I have a friend who used to work for a major hotel chain which provided facilities on a grand scale for the sales jamborees of companies. I remember his tale of the big box marked "glass...fragile" which arrived the day before the 700 reps came for the brainwash — it was so heavy it needed a fork-lift to move it to the ball-room. But the big secret was revealed when the conference opened: Before each rep was a pencil, paper folder of bumph...and a

mirror! During the presentation the men were instructed to pick up the phone, smiling and saying: "I am your friendly rep and I am here to help you..."

Funny, pathetic or whatever, I jumped through a similar hoop years ago learning sales techniques. I grant you I thought it pretty silly until I got the point. It was training in body language at its crudest. But however much we may laugh, I am still susceptible to the good sales pitch, which is far more than the mere words of the transaction...

The helping hand?

There is a large sports complex near where I live. It's popular and busy all the year round and is reached by a long open road, wide and unprotected from sun or wind for over two miles. Last week as I turned into it from my home I noticed a youngster struggling into the strong rainy headwind. He was carrying an enormous sports bag which kept slipping off his shoulder. I recognised him as one of my customer's youngsters, so without a thought pulled the car to the kerb, opened the window and called out: "Do you want a lift?" as I would be passing his house on the way to the shop. He stopped, looked hard, said "No", and walked on.

It's a long time since I have felt guilty. I felt worse. The lad was right. I didn't know what to say, so wound up the window and drove off. Sometimes, I think it's a rotten world, don't you?

SCHICK®

out-strips the competition:

CONFORT **PLUS**



First branded disposable razor with NEW LUBRIDEX® STRIP

* LUBRIDEX—the new lubricating film for a smoother, more comfortable shave.



SCHICK + LUBRIDEX

—one of the world's best known shaving brands *plus* the very latest in shaving technology—an unbeatable combination for all wet shavers!

PLUS

NATIONAL PRESS ADVERTISING

PLUS

FULL PROMOTIONAL PROGRAMME . . .

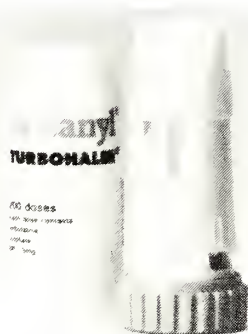
Schick gives you the edge in a £60-million market.



Spearhead Ltd

258 Vauxhall Bridge Road, London SW1V 1BS
Tel: 01-828 3443 Fax: 01-630 9745

SCRIPT SPECIALS



Bricanyl Turbohaler

Astra Pharmaceuticals are launching a new inhaler on March 28. The Bricanyl Turbohaler is a dry powder inhaler which delivers metered 0.5mg doses of terbutaline sulphate without additional carrier compounds. Astra say that it delivers micronised drug to the lungs "at least as efficiently" as a metered dose aerosol.

With the inhaler in an upright position, the user twists the blue grip at the base of the device to load an 0.5mg dose, then puts the Turbohaler to the mouth and inhales. Astra say the drug then passes through spiral channels in the mouthpiece, which breaks it up into particles of an ideal size for distribution through the lungs.

The company says that aerosols powered by chlorofluorocarbons (CFCs) require complicated co-ordination by the patient. And, because of the speed with which the drug leaves the aerosol and the right-angled pathway to the lungs, a large proportion of the drug may be left impacted on the back of the throat.

Astra say ease of use and reliability make the Bricanyl Turbohaler ideal for asthmatics of all ages, and suggest that it is superior to commonly used dry powder devices in acute stress, owing to this simplicity and to the fact that it works at low rates of inspiratory airflow.

Each Turbohaler contains 200 doses, and a visual warning shows when there are only 20 doses left and when the device is empty.

Manufacturer Astra Pharmaceuticals Ltd, Home Park

Estate, King's Langley, Herts WD4 8DH. Tel: 09277 66191

Description Metered dose powder inhaler containing 200 x 0.5 doses of micronised terbutaline sulphate without carrier compounds

Uses Asthma and other bronchopulmonary disorders in which bronchospasm is a factor

Dosage One puff as required, up to a maximum four times a day

Supply restrictions POM

Packs Single, £17.88 trade

Issued March 1988

Oramorph oral solution

Boehringer Ingelheim's Hospital Division are introducing a ready-to-use liquid oral preparation of morphine sulphate. Oramorph is manufactured to a precise 10mg morphine sulphate BP in 5ml and has a two year expiry date.

The company says that the solution, which is available through wholesalers, means reduced storage requirements for liquid morphine and narcotic powders, and the 100ml and 500ml bottles will give scope for original pack dispensing, avoiding the need to repack bulk liquids.

Manufacturer Boehringer Ingelheim Ltd, Hospital Division, Ellesfield Avenue, Bracknell, Berks RG12 4YS. Tel: 0344 424600

Description A clear, colourless solution of morphine sulphate BP 10mg in 5ml with a bland flavour for patient acceptability

Uses Relief of severe pain

Dose *Adults* Usually 10-20mg (5-10ml) every four hours

Children under one year Not recommended

One to five years Maximum dose 5mg (2.5ml) every four hours

Six to 12 years Maximum dose 5-10mg (2.5-5ml) every four hours. Dosage can be increased under medical supervision according to the severity of the pain and the patient's previous analgesic requirements. Morphine sulphate is readily absorbed from the gut following oral administration, however, when Oramorph oral solution is used in place of parenteral morphine, a 50-100 per



cent increase in dosage is usually required in order to achieve the same level of analgesia

Contraindications Respiratory depression, obstructive airways disease, known morphine sensitivity, acute hepatic disease, acute alcoholism, head injuries, coma, convulsive disorders where intracranial pressure is raised. Concurrent administration of MAOIs

Precautions Nausea and vomiting may be troublesome; phenothiazine anti-emetics may be given. Wise to reduce dosage in chronic hepatic and renal disease, myxoedema, adrenocortical insufficiency, prostatic hypertrophy and shock. Inadequate evidence of safety in pregnancy and lactation

Supply restrictions POM

Packs Tamper evident bottles of 100ml (£2.31) and 500ml (£9.24, both prices trade)

Product Licence 0015/0122

Issued March 1988

Emcor from Merck

Merck are introducing a new once-daily beta blocker for the treatment of hypertension and angina; Emcor and Emcor LS will be available from April 5.

The company says that clinical studies have shown that Emcor, which is highly beta-1 selective, is more effective than atenolol in the treatment of hypertension.

Manufacturer E. Merck Ltd, Four Marks, Alton, Hants GU34 5HG

Description Emcor, containing 10mg bisoprolol fumarate, are pale orange, heart-shaped, film-coated tablets. Emcor LS, containing 5mg bisoprolol

fumarate, are pale yellow, heart-shaped, film-coated tablets

Uses Hypertension and angina pectoris

Dosage *Adults* usual dose 10mg once daily, range 5mg to 20mg per day. *Elderly* No adjustment required normally; 5mg daily may be adequate. *Children* No experience

Contraindications Should not be used in cases of untreated cardiac failure, cardiogenic shock, heart block, extreme hypotension or marked bradycardia. Use with care in peripheral circulatory disturbances such as Raynaud's phenomenon. Use with caution in asthmatics and in diabetics, since the symptoms of hypoglycaemia may be masked

Side effects include dizziness, lassitude, mild headache, perspiration, worsening of intermittent claudication or Raynaud's disease and parasthesia. Decrease in blood pressure or pulse rate, skin rashes, dry eyes and sleep disturbances have been reported. Dosage reduction may be necessary in patients with severe renal or hepatic dysfunction

Interactions Effects of other antihypertensive agents may be potentiated. Use cautiously with myocardial depressants, calcium antagonists or Class I anti-arrhythmics. (See Data Sheet). Rifampicin may reduce half life of bisoprolol. The effects of insulin or oral hypoglycaemics may be potentiated

Supply restrictions POM

Packs Calendar blister packs of 28 tablets (Emcor £8.96, Emcor LS £6.98)

Product licence numbers Emcor 0493/0126, Emcor LS 0493/0127

Issued March 1988

BRIEFS

H.M. Norton are introducing nifedipine capsules 5 and 10mg from March 21. The orange yellow capsule will be available in packs of 100s. (5mg £8.15, 10mg £12.15). *H.N. Norton. Tel: 01-530 7166.*

Urifix non-adhesive sheath tape (3cm by 5m £5) has been added to the Drug Tariff from March 1, say distributors *North West Medical Supplies Ltd. Tel: 0204 852383.*

The telephone number for Bard Ltd is 091-534 3131 not as last week.

COUNTERPOINTS



Kylie to protect skin and beds

Nicholas Laboratories' new Kylie Pant (around £5) is a washable incontinence garment designed for women with light stress incontinence.

The company says it resembles normal underwear as closely as possible, discreetly and effectively absorbing small quantities of urine without causing sore skin.

The main body of the Kylie pant is made from polyester cotton, with the crotch area made from the material used for the Kylie absorbent bed sheet with the addition of a protective outer layer identical to the waterproof pouch of Kango marsupial pants.

The crotch area is designed to absorb up to 50ml of urine, and Nicholas say that, using sewing technology developed at St Pancras Hospital, voided urine cannot seep out beyond the

waterproofed section. The Kylie Pant can be washed by hand or machine and has a life span equal to that of normal underwear. Sizes are available to fit hips 32in to 56in.

Also new is the Kylie Bed Protector — an "aesthetically acceptable alternative and improvement" on the traditional disposable plastic draw-sheet, which can be used under the Kylie absorbent bed sheet or under a linen draw-sheet.

Nicholas say the Kylie Bed Protector (£3.80 trade) eliminates embarrassing rustle, does not slip and does not encourage the skin to sweat. The material is soft to the touch and drapes without creasing or rucking.

The Kylie Bed Protector measures 40 inches by 60 inches and can be washed in a domestic machine. *Nicholas Laboratories Ltd. Tel: 0753 23971.*

Simcare series

A series of three advisory booklets on intermittent self catheterisation for nurses, patients and their families has been produced by Simcare. The A5 size booklets are designed to provide essential information on this technique of managing urinary incontinence and includes step-by-step guides for patients. Simcare say the idea of ISC is to teach patients to catheterise themselves at regular intervals to empty the bladder. *Simcare. Tel: 0903 761122.*

ON TV NEXT WEEK

G TV Grampian	U Ulster	STV Scotland
B Border	G Granada	(central)
C Central	A Anglia	Y Yorkshire
CTV Channel Islands	TSW South West	HTV Wales & West
LWT London Weekend	TTV Thames Television	TVS South
C4 Channel 4	BT TV-am	TT Tyne Tees

Actifed:	All areas
Anadin:	All areas
Askit powders:	GTV,STV
Benylin:	All areas
Day & Night:	U,STV,G,Y,C,TT,C4
Genesis:	All areas
Junior Panaleve:	Y
Karvol:	All areas
Listerine:	All areas
Macleans toothpaste:	All areas
Mediquell:	GTV,STV,C4
Mylanta II:	G
Natrel Plus:	All areas
Panadol:	GTV,STV,G,Y,C,A,HTV,TSW,TVS,TTV,C4
Proflex capsules:	Y
Reach toothbrushes:	LWT,C,TVS,A,TVam
Redoxon effervescent vitamins:	ITV,C,G,TVS,STV,HTV,U
Setlers Tums:	All areas
Silkience:	GTV,U
Simple skin care:	All areas except LWT
Simplicity:	All areas
Sinutab:	C4
Strepsils:	All areas
Supradyn effervescent vitamins	ITV,C,G,TVS,STV,HTV,U
Tixylix cough linctus:	TTV
Triogesic decongestant:	TTV,C4,TVam
Zestavite:	TVam

WATCH OUT FOR THESE ADS!

Nelsons 1988 Advertising Campaign will "Back the Dealer" with over 200 advertisements. The huge schedule of titles will include...

Radio Times Sunday Telegraph Cosmopolitan
TV Times Family Circle Woman's Own
Readers Digest Good Housekeeping Health Magazines
You Woman & Home Mother & Baby Press
Sunday Observer Ideal Home

Be sure your stocks are ready - contact your wholesaler now!

or call us on our Trade Order number 0800 289515.

TEETHING TROUBLES

Teething troubles...
Nelsons

SORE SKIN

Sore skin...
Nelsons

BITES STINGS

Bites and stings...
Nelsons

COLDS

Colds...
Nelsons

nelsons
HOMOEOPATHY

5 Endeavour Way, Wimbledon, London SW19 9UH

To all shareholder members of



UniChem

WHY ARE MACARTHY TRYING TO BUY UNICHEM?

“A successful outcome of the bid would transform the fortunes of Macarthy”

“The outcome of the bid is critical to Macarthy's future”

“The benefits to Macarthy would be very substantial indeed”

The above quotes are from Fleming Research

YOU, NOT MACARTHY, SHOULD RECEIVE THE TRUE VALUE OF UNICHEM

***The value of shareholder membership
in UniChem is proven – keep it that way!***

For further information on the range of benefits that UniChem provides solely for independent pharmacy, contact
W. H. Hart M.P.S., UniChem Ltd,
UniChem House, Cox Lane, Chessington, Surrey. Tel. 01-391 2323

UniChem Action for Pharmacy

Share prices can go up as well as down. Maximum 10,000 shares per member

Band-aid kid

Johnson and Johnson are running a charity appeal through their Band-aid plasters.

The Band-aid Kids Appeal is designed to raise money for Dr Barnados, and the company hope to raise £100,000. The money will be used to buy special recreational equipment such as computers, sports equipment specifically adjusted for children with handicaps, and activity holidays.

The Appeal will appear on 750,000 special packs of Band-Aid plasters. For every pack of plasters purchased Johnson and Johnson will donate £1 to Dr Barnardo's. *Johnson and Johnson Ltd. Tel: 0753 31234.*

Money off

Scott Ltd are circulating money-off coupons for Andrex to 4.1 million consumers this Spring in a promotional offer.

The coupons, which will be valid until the end of May, will offer 10p off a pack. They will be circulated in advertisements in the magazine *Shoppers Friend* which is distributed free to households around the country. *Scott Ltd. Tel: 0342 27191.*

Classic cash-back

Wilkinson Sword are running a cash back promotion.

From now until the end of April, the company is offering a £1 money back offer on specially flashed packs. Consumers can claim the cash back by returning proof of purchase in the form of one special offer Classic razor backing card together with one special offer backing card from a Classic Double Edge blade pack. The promotion is also available to consumers who return the special offer backing cards from two flashed packs of Classic Double Edge 10 blades, or four flashed 5 blade packs. *Wilkinson Sword Shaving Division. Tel: 0670 713421.*



Le Clic for Tuffs

Keystone are launching a new camera in the Le Clic fashion range designed for those with action lifestyles. The Le Clic Tuff 35mm weatherproof also extends the Le Clic market further by targeting men as well as women.

The Tuff is claimed to be water, dust and sand resistant,

and features automatic film loading and motor film advance, automatic rewind, a focus-free lens system and built-in electronic flash. Designed in gunmetal grey with black and yellow trim, the Tuff is priced at £59.95. *Keystone Camera (UK) Ltd. Tel: 0533 841067.*

Sweet treat

Mitchellhill's have introduced a new organic range of biscuits. The range includes a carob coated wholemeal digestive (£0.59). The existing wholemeal digestive biscuit (£0.49) has been reformulated, and three cookies, muesli, honey and spicy carob chip, ginger and orange retail at £0.39.

All packs display the Organic Growers and Farmers logo. *Distributors G.R. Lane Health Products Ltd. Tel: 0452 24012.*

Fortify to go

Cow & Gate are discontinuing their meal replacement brand Fortify due to poor sales. Credit for unused stock may be claimed by filling in the coupon in this issue of *C&D* and returning it, before May 20, with plastic reclosure lids and tops from 440g and 132g packs to *Fortify Returns, Freepost BU279, Burnley, Lancs BB1 1ZA.*

Arun Products Ltd are taking over distribution of Rose's Diabetic Squash from Tuesday, April 5. Terms of trade will continue as previously. *Arun Products Ltd. Tel: 0243 554141.*

E P I L A D Y

THE REVOLUTION IN LEG CARE CONTINUES

- The success of Epilady continues and for 1988 we have an even bigger success story to tell your customers.
- Our revolutionary new hair remover continues to be a top seller. Support for EPILADY includes —



Consumer advertising
Promotional video and point of sale material
Promotional activity

We are spending over £800,000 this year to help you sell Epilady



EPILADY HOT LINE (01) 885 2999

ORIS BEAUTY PRODUCTS LTD, OSEM HOUSE, 102 BRANTWOOD ROAD, LONDON N17 0DX.

NOTHING ADDED.



EVERYTHING TAKEN AWAY.

A NEW CLEANSING MILK FROM ANNE FRENCH* IS ABOUT TO HIT YOUR SHELVES. THE LEADING LIQUID CLEANSER, ANNE FRENCH, WILL NOW BE JOINED BY A FRAGRANCE FREE VERSION.

BUILDING ON THE STRENGTH OF THE ORIGINAL MILK, THE NEW ADDITION WILL ATTACK THE GROWING FRAGRANCE FREE SECTOR.

WITH A NATIONWIDE PROMOTIONAL INVESTMENT OF £½ MILLION, CUSTOMER INTEREST WILL SOON LEAVE YOU WITH EVERYTHING TAKEN AWAY.



FACE TOMORROW

On the line!

The First Years, manufacturers and distributors of child development, health and safety products, are to offer a telephone information service from April 1.

"Small Talk" — on 01-387 0876, open 9.15am to 5.30pm Monday to Friday — will offer information on the company and its product range, stockists and childcare. Though aimed primarily at consumers, the service will also respond to queries from health professionals, retailers and the Press. *The First Years (UK) Ltd.* Tel: 0279 730390.

Bath time

Dreiturm are launching a range of bath oils made from herbs and esterised oils through distributors Healthy Body Care. The product (150ml £3.75) comes in four fragrances — camelia, rosemary, melisse and juniper. Advertising is planned to break in the Northern Press. *Healthy Body Care.* Tel: 061 443 1200.

Arrowmed Ltd are taking over distribution of Langdale's cinnamon essence. *Arrowmed Ltd.* Tel: 0420 64300.

Christy move into natural haircare

Thomas Christy are distributing a new range of haircare products.

The Henna Plus range is based on "natural" ingredients and includes shampoos, conditioners, styling sprays, bleaching sprays, treatment wax and henna colouring powders, and is divided into products for blondes and brunettes. None have been tested on animals.

The flagship of the range is Hair Miracle, a cream designed to condition and style at the same time. It can be used on wet or dry hair and does not need to be rinsed off.

Two merchandisers are available, one for each half of the range. The blonde hair merchandiser carries shampoo and conditioner, Hair Miracle, treatment wax, styling spray, bleaching spray based on natural camomile and henna colouring powders in neutral and golden blonde. The other merchandiser carries the same, except that the colouring powders are brown and auburn, and in place of the bleaching spray is Wet Look spray.



Support for the range includes women's Press advertising during the summer, with a spend of £300,000, and trial size sachets of Hair Miracle, free to the retailer. Orders will carry a 13 for the price of 12 offer on Hair Miracle. *Thomas Christy Ltd.* Tel: 0252 29911.

Philips for all the family savings

Philips small appliances are running a £5m family savers Spring promotion till the end of April. Consumers who buy any small appliance during the period will be able to apply for a family savers voucher book worth over £100 (proof of purchase required).

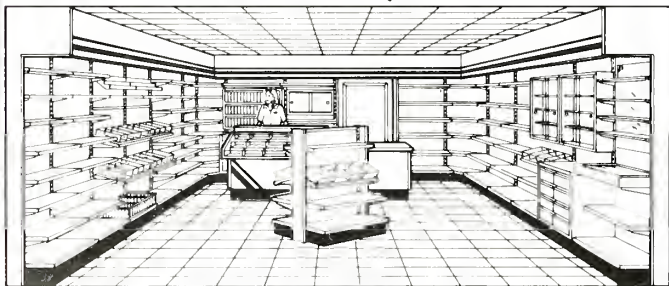
Consumers can save £20 on a washing machine or dishwasher, give a child a free wildlife treat, get a lawn edger from Qualcast, save money on their next small appliance purchase or save £5 on a rechargeable Philipsave, Philips say.

The promotion will be backed by a national Press campaign and a range of point of sale showcards with redemption leaflets and local dealer artwork. *Philips Home Appliances.* Tel: 01-689 2166.

Laboratory Facilities have announced that from April 1 all orders for Nunale cream, Super Liquid, nail files, Nilbite, and Dentifoam denture cleaner should be sent direct to them at: 24 Britwell Road, Burnham, Slough SL1 8AG. Tel: 06286 4149.

ROE SHOPFITTINGS

for a healthier outlook



Increase sales with our stylish fittings. The range includes Pharmacy Units, Showcases, Shelving and Stock Cupboards. Everything is tailor-made to your specifications and colour, to suit your budget and turnover!

Name _____

Address _____

Tel. No. _____ CD/3/88



ROE SHOPFITTINGS LIMITED

REGENT HOUSE, DOCK ROAD, BIRKENHEAD
MERSEYSIDE L41 1DG. Tel: 051-647 8794

THE TRIANGLE TRUST

The Triangle Trust 1949 fund is an independent charitable trust administered by a Board of Trustees. Its primary aim is the relief of hardship or distress in the case of people and their dependents employed or formerly employed in the pharmaceutical industry in Great Britain. Such relief may include assistance with educational expenses.

The Trustees will also consider on their merits any applications for assistance beyond the scope of an employer's responsibilities, concerning education or training at recognised centres of study for general or special subjects.

For additional information,

or to apply for assistance, write to:-

The Secretary Dept CD
THE TRIANGLE TRUST 1949 FUND
Clarges House, 6-12 Clarges Street
London W1Y 8DH

THINKING ABOUT SHOPFITTING?

* For a superb-looking shop plus increased t.o. and profits.

PLEASE RING US

01-805 6240

01-804 8898

* N.P.A. Approved

MODISPLAY SHOPFITTING LTD

1 LOCKFIELD AVE, ENFIELD, MIDDX EN3 7UJ.



Get out of the take-away business.

Who are you in business for? The shoplifters? It's about time you found out about a brilliant tagging system that's not just for fashion shops.

It's called THORN Article Protection. To produce it, two major names in retail security joined forces: THORN Security of Britain and Checkpoint Systems Inc of America.

Now, after 20,000 installations and the production of over a billion tags, it has proved to be the most versatile security system yet. Five different types of

tag can protect virtually everything. From bottles to pens. From tights to sunglasses. From cassettes to office equipment.

It means your staff can stop being part-time store detectives – and you can concentrate on running the business and serving your paying customers.

For your profit's sake you ought to know about it. Send us the coupon and we'll send you details.

THORN
Article Protection
Checkpoint[®]
SYSTEMS INC.

THORN Security Limited,
Dept AP, 211-217 Lower Richmond Road, Richmond, Surrey TW9 4LN Telephone 01-876 0444

Yes. Tell me about the one system that protects the profits on all my merchandise.

NAME _____

POSITION _____

COMPANY _____

ADDRESS _____

POSTCODE _____

TELEPHONE _____

Post to: THORN Security Limited,
Dept AP, 211-217 Lower Richmond Road, Richmond, Surrey TW9 4LN
Telephone 01-876 0444

CD19B

Which is the high performance model for today's pharmacist?



Maybe the sheer speed of the Lotus takes your fancy. Perhaps the awesome power of the Porsche is for you. Or then again, you might dream about being behind the wheel of a Ferrari.

However, if you're looking for a real business performer, the Vestric van leaves the rest standing. Its on the road figures can't be matched, as it covers hundreds of miles regularly, delivering to your pharmacy, ensuring that you're well stocked with both ethical and OTC products.

This red van is just one of a fleet of over 370, backed by 25 articulated vehicles, all serving to link our Central Stores and Distribution Centres to your local Vestric branch.

So if you're a chemist who's going places, the Vestric van really does the business for you.



· WE'RE ALWAYS THERE · WE ALWAYS CARE ·

Shulton move Insignia range into total haircare

Shulton are extending the Insignia all-over body programme with the launch of a haircare range.

The company's research showed that 16-24 year olds, the core Insignia consumers, are heavy users of haircare products. The new products offer a co-ordinated range to cover all hairstyling needs, comprising conditioner, hairspray, styling mousse and gel, plus a reformulation of the original shampoo (all £1.39). Packaging is similar to the rest of the range, but with a yellow "Hairstyle" logo.

Support for the launch includes introductory prices, television and Press advertising, couponing, educational leaflets and POS. The company will be spending a total of over £2m on the television campaign, which will run in three bursts: June and July, November and December, and March 1989. Advertisements will feature the whole Insignia range.

In addition there will be a Press campaign for Hairstyle alone, running through June and July in national newspapers and offering 20p off coupons.

Further coupons will be offered in the Hair Book, a leaflet



produced to explain the uses of the new products, which will be available via POS, on-pack and through mail-ins from magazines.

The whole range will be offered at an introductory price of £1.19, and in addition, a special combination pack will offer shampoo, mousse and gel, with

the Hair Book, for £2.99. Another special pack will be available for Christmas.

The range will also be backed by a PR campaign.

New POS comprises a 10 inch shelf merchandiser and shelf edge strips. Shulton (Great Britain) Ltd. Tel: 0734 793000.



New look for Amplex

Backed by a £1m television advertising campaign, Amplex is being relaunched in a new pack, with a new formula and a new Amber variant.

The new improved formula contains an agent to help prevent stinging, and the new design, which colour codes the variants, is designed to express coolness, say Ashe, who see the relaunch as reinforcing their number one position in the roll-on anti-

perspirant sector.

A 36-unit display tray containing six of each fragrance, all price marked £0.59, is now available. And from May a brand new television commercial, still using the "Don't get a complex, get Amplex" slogan will run alongside a PR campaign in national magazines and the regional Press, say Ashe Consumer Products Ltd. Tel: 0372 376151.

Keylines for April

The following products are among the April Keylines on offer from Numark: Dr Whites looped towels; Farleys rusks and Breakfast Timers (with 50p off coupons for Tommy Tippee products); Fashion Style perms; Flex conditioner, shampoo and styling mousse; Heinz babyfood cans; Johnson's baby powder; the Kleenex paper range, excluding kitchen towels; Milupa infants foods; Peaudouce babyslips; Pennywise; Rightguard AP deodorants; Soft and Pure cotton wool; Sun silk hairspray, and Tampax tampons.

Family Carelines on offer next month include Abidec, Andrews salts, Anusol, Aspro Clear, Paraclear with a free thermometer, Junior Paraclear, Dentinox teething gel, toothpaste, colic drops and cradle cap, Dramamine, Eurax, Junior Disprol, Kwells and Junior Kwells, Mycota, PR spray, Nurofen, Optrex and Oraldene mouthwash. Independent Chemists Marketing Ltd. Tel: 0985 215555.

Summer moves from Max Factor

Max Factor are introducing new products and running Summer promotions on their colour cosmetics ranges.

The Max Factor brand, currently in the process of repackaging, will be extended with the launch of four new products: Max Factor Ultra Matt, a water-based foundation said to be particularly suitable for oily or combination skins (£2.99); blusher duo, which offers two shades, one to be used as highlighter (£2.99); eyeshadow quartet, in four colourways; and kohl pencil in 10 shades (£1.99). The new products will be phased in along with the repackaging during the year.

New to the Colourfast range is Perfect Lash mascara (£4.50), which the company say is waterproof in use, but can be washed off with soap and water. It comes in six shades: soft damson, aquamarine, airforce blue, capri blue, soft brown and black. The product also features a "dual action" applicator brush, with short rounded bristles for applying colour, and longer straight ones for separating lashes.

And the Colourfast range is being promoted with a gift with purchase offer. The Summertime Blues collection, featuring mascara, eyeliner, powder, cream and wand eyeshadows in shades of blue offers a free kohl pencil with every purchase.


Two new products are being added to the Miners range. Doodle Bugs are creamy crayons that can be used as eyeshadow, blusher or lipstick (£1.35), available in four shades.

The second new Miners product is Two Timers, two shades of powder eyeshadow pressed together, in eight different shade combinations.

New products in the Maxi collection are promotional only and will be available from the end of March until June. As with Miners there is a split eyeshadow duo, complemented by split eyeliner pencils offering two colours in the same lead (£1.69).

Finally the Summer promotion for the Mary Quant range is entitled Beachcombing and features pale eyeglosses with vibrant purple and green for mascara and eyeliner. Also included is a new blusher, Shybaby, a "cream powder" to be applied with the fingertips, in honey brown and sweet violet. The promotion runs from April until June. Max Factor Ltd. Tel: 01-568 4333.

Our Name... You

When it's  you can rely on it.

When we put our name to a product it carries the full weight of our reputation and our commitment, moreover it provides your best protection under the new legislation.

CP Pharmaceuticals is justifiably proud of the reputation which we have established for quality and consistency; the development and introduction of new product lines; and the full back up service and promotional support which we provide.

Now with one of the most sophisticated production facilities in Europe; probably the most comprehensive product range on the market and a major ongoing programme of research and development we are taking this commitment a stage further.

Add to this the indenticoding of the CP range, the phased introduction of original packs and the quality of our liability cover – and you have in CP the name you can rely on.

The name that makes the difference

CP Pharmaceuticals Ltd., Red Willow Road, Wrexham Industrial Estate, Wrexham, Clwyd LL13 9PX. Telephone: (0978) 661261, Fax: 660130, Telex: 61507 CPWREX G.



ur Reassurance

CP

Penicillin Elixir BP
100ml
125mg per 5ml

Salbutamol B.P.
2 mg
500 TABLETS

Paracetamol B.P.
500 mg
100 TABLETS

Amoxycillin B.P.
250 mg
100 CAPSULES

Aluminium Hydroxide B.P.
500 TABLETS

Benorylate Mixture B.P.
Each 5ml dose contains
2g Benorylate B.P.

Multiphasic B.P.

Amoxycillin Mixture BP
125 mg
per 5 ml

Emulsifying Ointment B.P.
500 g

Rimmel go co-ordinated

Rimmel are backing their Ultra Colour range with a national advertising campaign and new shades for Spring.

Advertising will take the form of 48 sheet posters throughout the country during April, followed by cross-track posters on the London Underground during May.

The company are introducing two new colour ranges, to work alongside the existing neutrals collection which will be retained. Merchandisers will now carry the neutrals, plus two Co-ordinates collections: Translucents, in soft pastel shades; and Brights, clear fruity colours. Each of the Co-ordinates collections feature four sets of two shades, with one available as colour stick and nail polish, the other as mascara and pencil, with both shades combined as a split powder shadow. Rimmel say this makes co-ordination easier for consumers, and doubles the shade range while maintaining the same number of stock keeping units. *Rimmel International Ltd.* Tel: 01 637 1621.



Get the massage

A Clarins body massage is no longer confined to beauty salons. The company is launching Multi Mass — an all over body massage product designed to simulate five of the recognised professional massage movements at home.

The product is recommended for daily use with body care products. It has two surfaces: the refining stimulator for initial product application shown here on the top side, and four flexible fins on the other to be used with and against the slant for a gentle or firm massage. And with two ends the product provides a crescent to

massage ankle to thigh, and twin thumbs for massaging the back.

Initially the product will be packaged in a clear box with 30ml trial sizes of tonic shower bath lotion and contouring body creme (£15), which are available in fours along with body care product testers in a merchandiser. POS material including video tapes and consumer leaflets is also available.

And in June double page advertisements showing body treatments and Multi Mass usage will feature in the women's Press. *Clarins (UK) Ltd.* Tel: 01-629 2979.



Eyes right for Revlon

Revlon are introducing firming eye gel (£12.50).

Packaged in a glass jar, it comes with a spatula for application, and is to be used with a moisturiser. *Revlon International Corporation.* Tel: 01-629 7400.

On the nail

Original Additions are to back their Stickers press-on false nails with national television advertising.

Running from April, the campaign begins on TVS and will gradually roll out across the country. The campaign carries the copyline "Get Stickers . . . get noticed". *Original Additions Ltd.* Tel: 01 573 9907.

Double up

Christian Dior are launching a new range of eyeshadow duos.

Packaged in blue and gold mini compacts, the shadows (£11) come in eight combinations including pink and brown (rose/havana); blue and beige (blue/champagne); brown and grey-blue (earth/sea); blue and turquoise (green/lagoon) and lilac and mauve (ocean/mauve). *Parfums Christian Dior.* Tel: 01 235 9411.

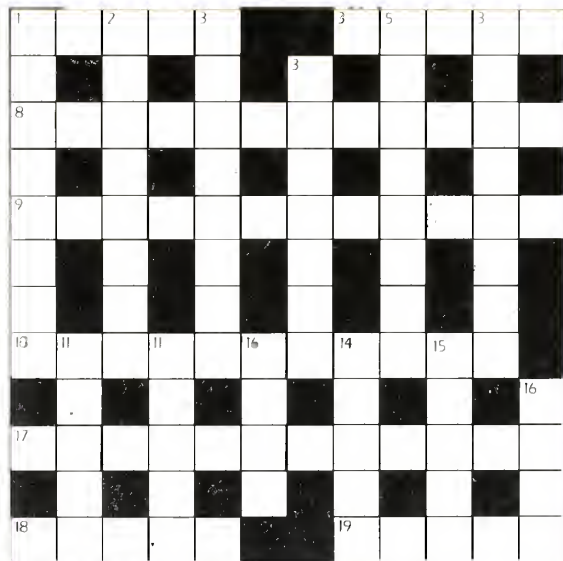
Lashings

Lancome are introducing new mascara colours and running a promotion for Spring.

The new colours, in the Keracils range, are brown and marine and brown and navy blue. And the Keracils Spring promotion offers a gift with purchase of a 30ml Effacil lotion and a 4ml Forte-vital eyes. *Lancome.* Tel: 01-629 8867.

WYETH GENERICS PHARMACY CROSSWORD NO. 3

The solution to No. 3 will appear alongside No. 4 in May, 1988



Clues Across

- 1 Supplier of 5 (5)
- 4 Lively American soldier in the drink (5)
- 8 A sort of tinder action to imbue with an opinion (12)
- 9 Train a trail to become under one authority (12)
- 10 How to take medicine, standing on the bible? (11)
- 17 Ungulate from ancient Greek horse cum river (12)
- 18 She could be a gem (5)
- 19 Valued ground loses initial force (5)

Clues Down

- 1 Referee with famous mother? (8)
- 2 Overdose could do this (3,2,3)
- 3 Combing out awkward questions (8)
- 5 Supplied by 1 across (8)
- 6 Rent a room? Why, it could be deadly! (8)
- 7 Correspond, with 1 for 5, perhaps (5,2)
- 11 A very special type (5)
- 12 Merely loses point to insinuate (5)
- 13 Representative in the team of warriors (4)
- 14 Extreme remark (5)
- 15 Fifty-one with a motorway junction at the end (5)
- 16 Ill-treated sailor gone second-hand (4)

Submitted by Mr Jack Britton, MPS, Long Eaton, Nottingham

Solution to Puzzle No. 2

Across: 7 Sanity 8 Inulin 9 Unpleasant fever 11 Erse 12 Story 16 Kapor 17 Tail 21 Secundum anterum 22 Elders 23 Spurge Down: 1 Assured 2 Anodise 3 Still 4 Uniform 5 Clove 6 Snore 10 Net tuu 13 Cannery 14 Pastern 15 Scamper 18 Asset 19 Acids 20 Rasps

Prizes of £5 will be awarded to the senders of the first 10 correct solutions drawn on 7th May 1988.

Name _____ No. 3
Address _____
C&D _____

Compile your own & win £50

Send your crossword to **Wyeth Generics** If it's selected for publication here, we'll send you **£50** Puzzles should be no larger than 13x13 squares. *trade mark

Get the right result with

**WYETH*
GENERICS
QUALITY ASSURED**

Wyeth Generics, Wyeth Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berks SL6 0PH



MACARTHY PLC

FOUR GOOD REASONS WHY UNICHEM SHAREHOLDERS SHOULD RETURN THE PINK FORM

LEADING STOCKBROKERS, ROBERT FLEMING SECURITIES,
IN THE FIRST **INDEPENDENT** ASSESSMENT OF THE
UNICHEM/MACARTHY ISSUE, HAVE CONCLUDED:

1. That the £100 million valuation of UniChem by its own brokers is "excessively high."
2. That UniChem should be valued at £64.2 million, slightly below the value of Macarthy's proposed offer.
3. That Macarthy's proposed offer of £65 million was "entirely credible and fair".
4. That the commercial logic of a merger is powerful and substantial benefits would flow from its implementation.

CAN YOU AFFORD TO DO NOTHING?

Return your pink form or the FREEPOST form below to request the Board of UniChem to negotiate with Macarthy and to give *you* the opportunity to **choose** for yourself the future of *your* Society.

Note: The value of the proposed offer given above is based on Macarthy's current share price. The total consideration available to each UniChem shareholder would depend on the terms finally agreed for the allocation of the deferred consideration.

The information in this advertisement has been given by J Henry Schroder Wagg & Co. Limited on behalf of Macarthy PLC. The Directors of Macarthy PLC are the persons responsible for the information contained in this advertisement. To the best of their knowledge and belief (having taken all reasonable care to ensure that such is the case) the information contained in this advertisement is in accordance with the facts. The Directors of Macarthy PLC accept responsibility accordingly.

UNICHEM Proposed Merger with Macarthy

I
(Full name and address in BLOCK CAPITALS please)
of

.....
being a member of UniChem Limited hereby request:

1. The Board of UniChem to enter into immediate negotiations with Macarthy with a view to achieving a merger between Macarthy and UniChem.
2. The Secretary of UniChem to convene an Extraordinary General Meeting of the Society as soon as practicable at which a

firm proposal for the merger of Macarthy and UniChem will be put to the members in a form which, if sanctioned by the requisite majority, could thereafter be implemented.

Dated 1988.

Signed*

*In the case of a company this form should be signed on its behalf by a duly authorised officer.

Please return to:

Lloyds Bank Plc, Registrar's Department, FREEPOST (BR 492),
Goring-by-Sea, West Sussex BN12 4BR





MACARTHY PLC

SIX MORE SOUND REASONS TO RETURN THE PINK FORM

THE FINANCIAL ARGUMENTS FOR A MERGER WITH MACARTHY ARE NOW OVERWHELMING, BUT WHAT ELSE IS IN IT FOR UNICHEM MEMBERS?

1. A guarantee to honour the UniChem customer loan scheme.
2. A guarantee to supply any pharmacist, whatever their level of turnover.*
3. A guarantee to honour the existing Uni-Bond scheme and, if possible, bring forward payments.
4. A guarantee to pay out 'Prosper' and 'Prism' profit share much more quickly than UniChem does now.
5. A guarantee of strong marketing support.
6. A guarantee of a continued commitment to independent pharmacy.

NOW YOU REALLY CANNOT AFFORD TO DO NOTHING!

*Subject to status.

For more information on Macarthy's proposed offer for UniChem please contact Geoff Haselden MPS at Macarthy Medical Limited, Chesham House, Chesham Close, Romford, Essex RM1 4JX or telephone our merger 'Helpline' on Romford (0708) 46033 any time between 9.00am—6.00pm, Monday to Friday.



The information in this advertisement has been given by J. Henry Schroder Wagg & Co. Limited on behalf of Macarthy PLC. The Directors of Macarthy PLC are the persons responsible for the information contained in this advertisement. To the best of their knowledge and belief (having taken all reasonable care to ensure that such is the case) the information contained in this advertisement is in accordance with the facts. The Directors of Macarthy PLC accept responsibility accordingly.

Free movement in the Riviera

More than 200 pharmacists from six EEC countries met in Nice last Sunday to swap information about community pharmacy in their respective homelands. The conference was organised by French management consultants and partly funded by the European Commission. The meeting was the first of a series sparked off by the free movement Directive for pharmacy.

For some years now pharmacists have been working in professional blinkers, almost fanatically sticking to their role as drug experts and missing other opportunities because they have not been alert to market trends. Meanwhile others are waiting for an opportunity to encroach on pharmacy's business.

Peter Kielgast, chairman of the European Pharmaceutical Group, said the one exception to this had been clinical pharmacy. But, he told some 200 pharmacists who met in Nice, that pharmacy is increasingly threatened in its distribution role: he said pharmacists are the losers in a society of information and have only to a limited extent responded to market developments.

Reaction to commercial threats has tended to concentrate on defending areas already conquered, Mr Kielgast said. "The role of production was lost years ago and it would be unfortunate if that happens to the distribution role."

Pharmacy ignored

Too often, he said, pharmacy is left out. For example, the World Health Organisation has set targets to achieve "Health for All" by the year 2000. For Europe alone there are 38 goals but pharmacists are not mentioned in any of them.

Pharmacists must analyse what is going on in the market and try to influence what is happening.

Because of its commercial base community pharmacy has demanded new resources as a precondition for development "and that's exactly what pharmacists are not going to have," Mr Kielgast said.

He then outlined four trends which had implications for pharmacy: first, information and service now dominate society but so far this change has had little impact on pharmacy. Second, there is a biochemical-genetic revolution but will pharmacists be able to handle the products of the new technology and will there be new opportunities? Biological mechanisms are much better understood now and the public are more aware that a healthy lifestyle is important. What will these trends mean for everyday pharmacy?

There is growing dissatisfaction with conventional



Peter Kielgast: "pharmacists have been working in blinkers"

treatments and a move to alternative therapies. The fourth trend is the increased decentralisation and merging of business roles: for example, banks no longer monopolise financial services, opticians have lost their monopoly and garages compete with supermarkets to sell petrol and potatoes.

Mr Kielgast suggested that pharmaceutical organisations should assess the situation in their own countries and start to do something positive.

The rigid borders defining different health care professionals' roles are breaking down and the healthcare map is being redrawn with no fixed borders between professions. Mr Kielgast said for those who want to stand idly by this could be seen as a threat but for the creative and innovative it's a challenge that should make it more interesting to be a pharmacist.

Mr Kielgast said monopolies are vulnerable and will be allowed to exist only if they solve tasks in

a convincing way. Pharmacists' strongest allies are their customers. As businessmen pharmacists have decided what services to offer — a single small pharmacy cannot cover them all. However, it might be possible in an area for several pharmacies to co-operate and each to specialise in different services.

Mr Kielgast acknowledged that putting ideas into practice was not easy but he said the production/distribution role has to change to a market orientated service role. This is the only way pharmacy will survive in primary healthcare, he said.

Mr Kielgast predicted a comprehensive turnaround for pharmacy. And for that to happen some hitherto sacrosanct dogmas would have to be questioned. The alternative would be an American-style drugstore operation — an efficient distribution system with low use of pharmacists.

Pharmacy will have to demonstrate its financial efficiency too. For this documentary evidence of cost savings will not be enough, pharmacy will have to show itself to be cost conscious: a pharmacy has to make money to survive but it also has to save it for the society it serves.

Pharmacy should exploit its accessibility to the public.

Medicines monopoly at risk

The threat to the monopoly on medicine supplies is probably felt more acutely in countries like Italy, France, Germany and Belgium where medicines can be sold only in a pharmacy.

French pharmacists are concerned because they have lost sales of vitamin C and aspartame to supermarkets which are now pressing to be allowed to sell other medicines as well. During his presentation Mr Kielgast said that monopoly will most likely be lost.

Being the sole retail supplier of medicines was one of the main differences between pharmacy in the six EEC countries that emerged during sessions on Sunday morning. Representatives from six countries — Italy, Germany, Great Britain, France and Belgium and Spain — were asked to comment on a document put together by the organisers comparing pharmacy in the six

EEC states.

In the English/Francais group interest centred around comparative costs of medicines and how much pharmacists made. In France, Germany, Belgium, Italy and Spain pharmacists' earnings are based on the profit made on medicines supplied. Gross profit in these countries varies from about 26 per cent in Italy to 35 per cent in France with net profit around 11 or 12 per cent. The British cost-plus system proved difficult for pharmacists from other countries to grasp.

In Germany the straight profit on goods arrangement has brought severe problems. German medicines are among the most expensive in Europe. In some cases they are six times dearer than equivalent goods in Britain. The German government proposes to reform health funding

and one idea is to cut drug prices which pharmacists claim will mean they could lose £20,000 a year from pre-tax profits (see *News from Germany* last week).

To add to the problems Germany and Belgium have comparatively high numbers of unemployed pharmacists. Neither country controls its pharmacy student intake and seems unwilling to do so.

The unemployment situation in Germany is worrying the French who fear an influx of German pharmacists. A French delegate told C&D that the French Riviera is an attractive place for Germans and not just as somewhere to work.

The French have their own manpower problems. There are too many French pharmacists in the South and too few in the North and they seem reluctant to move around.

Council maintains *status quo* on 'personal control'

The Pharmaceutical Society's Council has decided that non-GSL medicines should not be sold or supplied in the pharmacist's absence and that all prescriptions for medicines must be seen by a pharmacist before being dispensed, although some dressings and appliances could be dispensed by trained assistants without the pharmacist's involvement.

Council has arrived at these conclusions after debating, at three separate meetings, comments received from 67 branches, two regions, one local pharmaceutical committee, two district pharmaceutical committees, 10 national pharmaceutical bodies and 33 individual pharmacists. The comments were in response to Council's consultative document on the Nuffield Inquiry Report (*C&D*, August 1, 1987, p208).

Council now intends to enter into discussion with the Department of Health to seek implementation of the final proposals, extracts of which are published below.

Personal control

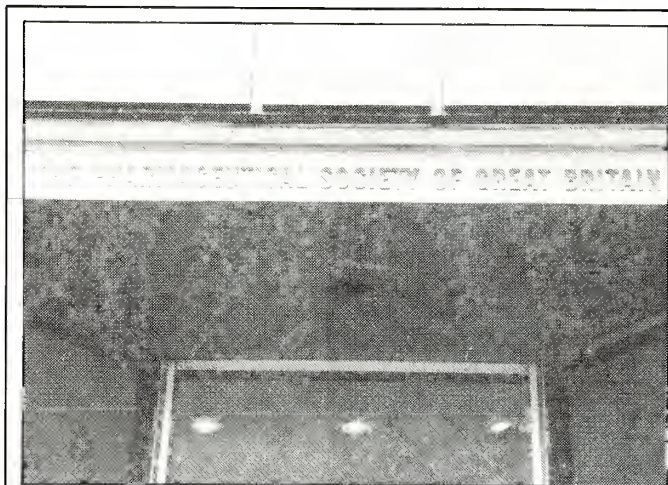
The Nuffield Committee concluded that the law should continue to require pharmacies to be under the personal control of a pharmacist and added that this requirement should be satisfied if the pharmacist, while temporarily absent on other professional work, could be contacted.

Council could see no reason for departing from the understanding of the term "personal control" that has existed under the Medicines Act 1968. The interpretation is that the pharmacist's presence is required on registered premises except for occasional, short periods during which only GSL medicines may be sold.

Supervision of medicines sales

Nuffield recommended that the handling of medicines whose sale is restricted to pharmacies should be a matter of professional practice rather than detailed in the statute.

In its consultative document, Council took the view that no medicines should be sold, other than GSL (and those only within the interpretation of personal control), from a pharmacy in the absence of a pharmacist. That view had the full support of those



Summary of proposals

1. No change in meaning of "personal control".
2. No non-GSL medicines to be sold or supplied from a pharmacy in the absence of a pharmacist.
3. All non-GSL medicines to be sold from pharmacy premises by a pharmacist, or within the terms of a written procedure, under the direction of the pharmacist in attendance, by an assistant who has successfully completed an approved course of training, or by an assistant when a pharmacist is aware of the transaction and in a position to intervene.
4. All prescriptions for medicines to be seen by a pharmacist who would judge whether the prescriber needs to be contacted, whether the prescription or dispensed medicine needs to be seen or checked again by a pharmacist and whether the person who collects the dispensed medicine needs to be advised by a pharmacist.
5. Identification of the pharmacist who takes responsibility for the issue of a dispensed medicine after completing the above procedure (which may, at the discretion of that pharmacist, be during a short absence).
6. Some prescriptions for dressings and appliances may be dispensed by adequately trained staff, without the involvement of a pharmacist.
7. Special arrangements for repeat prescriptions to be sought after further discussions within the profession and when circumstances permit the necessary conditions to be applied in a substantial number of pharmacies.

who responded to this part of the consultative document. They concurred that it is the pharmacist's presence that makes the pharmacy unique among places at which medicines are sold or supplied. There is general agreement that nothing should be done to undermine that position.

The response to Council's proposals on what should be done to release time for the pharmacist to undertake key professional roles *within the pharmacy premises*, was less enthusiastic. Of 58 branches commenting, 30 wanted to preserve the present position under which the pharmacist is required by law to

be in touch with every transaction involving a non-GSL medicine, and in a position to intervene personally. The profession seemed almost equally divided in favour of and against the Council's proposals for a more realistic and beneficial practice (as far as the public is concerned) on the sale of non-GSL medicines.

The national organisations that responded were virtually all in favour of some change in the current position and most supported the general thrust of the Council's proposals. Against this background, and in the light of its firm resolve that nothing must be done to undermine the

uniqueness of the pharmacy, Council re-examined its previous proposals in great detail. The main concern of those responding, related first to Council's suggestion that each pharmacist in control of a pharmacy should use individual discretion to list medicines that always demanded personal contact between the pharmacist and the purchaser. The second concern related to the proposal that a record should be kept of each sale of a non-GSL medicine which was not listed and was sold without the pharmacist being aware of the sale.

The objection to the first proposal was on the grounds of inevitable inconsistency between the lists prepared by individual pharmacists, which could lead to confusion if customers could buy a medicine from an assistant in one pharmacy but only from a pharmacist in another. It is not clear why that should be a major problem. The exercise of professional discretion is bound to be individualistic. Council would expect all pharmacists to list, among others, medicines recently transferred from prescription-only control and all medicines in therapeutic groups with a high potential for misuse. Council will assist pharmacists by giving guidance on those categories and other classes of medicines which pharmacists should consider listing.

But Council could see no reason to retreat from the principle that a pharmacist should decide, and list, those non-GSL medicines which he or she would wish to sell personally and delegate sales of others to a designated member of staff with an acceptable standard of training. The assistant would work with a written procedure incorporating details of questions to be asked and directions on when the pharmacist must become involved in the transaction. Council sees this as a considerable improvement over the present situation, replacing as it does routine supervision of every sale of a non-GSL medicine by the direct involvement of the pharmacist in every transaction that demands advice that can only be provided by a pharmacist.

The objection to record-keeping was on the grounds of practicality and concern about unnecessary records. Council accepts these objections as being

well-founded, bearing in mind that the pharmacist on duty will be aware of most sales of non-GSL medicines and, under the proposed framework, will be directly involved in all sales recognised as requiring a pharmacist's expertise. Council has therefore dropped record keeping from its proposals.

The need for support staff to have completed a course of training acceptable to Council remains central to the proposals and the Society must retain final control. This can best be done by the Society "validating" particular courses as providing the required level of training for undertaking a specific task. Pharmacists will then know that a person who has successfully completed a named course will have demonstrated the required level of knowledge. The suitability of the person for a particular post and the tasks that may be delegated will remain the responsibility of the pharmacist in charge.

In summary, Council's decisions are:

1. The law should provide that retail sale or supply of non-GSL medicines should continue to be restricted to registered pharmacy premises and sales should only take place under

the direction of a pharmacist who is present on the premises and is available for consultation and the provision of advice. That pharmacist would bear professional responsibility for all transactions in medicines.

2. As a requirement of good professional practice, the pharmacist in personal control of a registered pharmacy would ensure that each sale of a non-GSL medicine is accomplished in one of three ways:

- (a) where the pharmacist is aware of each transaction and is in a position to intervene; or
- (b) where there is direct contact between the pharmacist and the purchaser; or
- (c) within the terms of a written procedure laid down by the pharmacist, by a member of staff, nominated by the pharmacist who has satisfactorily completed a course of training acceptable to the Society's Council.

The pharmacist in personal control who decided on (a) or a combination of (a) and (b) would, in effect, be continuing present practice. The new procedure, available as an additional option,

would be a combination of (b) and (c).

Under the arrangement in (c), the written procedure will include a list of medicinal products which require a direct contact between a pharmacist and the prospective purchaser for each sale. For medicines not so listed, the written procedure will specify the questions to be asked by the nominated assistant, instruction on the responses to questions that require reference to a pharmacist and details of the information to be given to the purchaser when a sale is made.

A change of legislation will be required before this redefinition of practice procedures can be put into effect. When that change is sought, Council will emphasise the benefits, together with the advantages of restricting the sale of medicines to pharmacies.

Supervision of dispensing

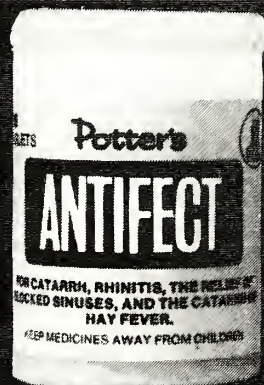
Council recognised that the essential role for the pharmacist certainly did not comprise physically counting tablets, pouring liquids from one container to another via a measure, labelling or undertaking clerical duties associated with the endorsement of the prescription. The essential role is assessment, the exercise of judgment and ensuring that

patients obtain the correct dispensed medicines, properly labelled and with information that will help them to derive maximum therapeutic benefit and encounter minimum untoward side effects, from a prescribed course of treatment.

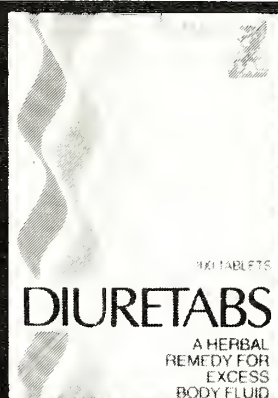
Given the right procedure and suitably trained staff, that role can safely be accomplished without the pharmacist having to supervise the dispensing in the sense of following every stage in the process for every prescription. But proper assessment cannot take place unless the pharmacist sees each new prescription at some stage during its passage through the pharmacy and before the dispensed medicine is given out. The pharmacist will then be in a position to make a professional judgment on what must be done thereafter, whether the prescriber needs to be contacted to clarify some point, whether and if so when, the prescription or a dispensed medicine needs to be seen or checked again by a pharmacist and whether the person who calls to collect the dispensed medicine needs to be advised by a pharmacist. It should be possible for the pharmacist who takes responsibility for the

continued overpage

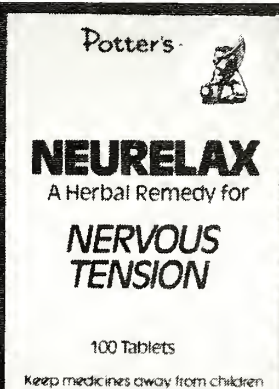
CATARRH & BRONCHITIS



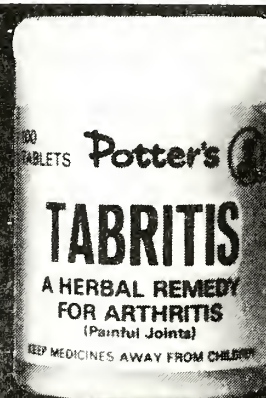
URINARY COMPLAINTS



NERVOUS TENSION



ARTHRITIS



Major herbal remedies from Europe's biggest herbal medicine producer

Potter's



Potter's (Herbal Supplies) Limited, Leyland Mill Lane, Wigan, Lancashire, England.

indicate that this medicine may be handed out during his or her brief absence, subject to any conditions that the pharmacist may specify.

Council now firmly believes that all first-time prescriptions for all medicines, *including any for GSL medicines*, should be seen by a pharmacist before the dispensed medicine is handed out.

Council is satisfied that exemptions from the redefined supervision requirements should apply to prescriptions for dressings and appliances that can be dispensed by appliance contractors provided the pharmacist who takes responsibility is satisfied that the support staff dealing with the prescriptions have the necessary training and experience.

Council's proposals to exempt certain "repeat prescriptions" raised misgivings among branches and national pharmaceutical organisations.

But Council remains convinced that, under closely defined conditions, it should be possible to make special provisions for some repeat prescriptions to be dispensed during short absences of the pharmacist from the premises. Council realises that these conditions could not be satisfied at present in more than a tiny



Society's headquarters, 1 Lambeth High Street

minority of pharmacies so has decided not to proceed with a detailed proposal that could be controversial. Council does consider, however, that a

framework should be established in primary legislation as soon as possible, to enable an exemption for some repeat prescriptions to be brought into effect by

secondary legislation, whenever the profession recognises the time to be right.

Summary

Council's proposals, when implemented, will reflect the changes in community pharmacy practice — the phasing out of the manipulative role and its replacement by that of assessment and advice; expertise in action and uses of medicines rather than manual dexterity in dispensing elegant preparations. Professional controls conscientiously applied and monitored are no less effective than controls specified by law.

The first priority will be to press ahead with validating and then expanding courses of education and training for support staff. The proposed alternative control arrangements cannot be implemented in community pharmacies generally, until there are sufficient assistants of the required calibre. There is a need for evaluation in terms of practice needs and rationalisation of support staff qualification.

Action rather than words is now appropriate. Legislative change will not easily be achieved but will be made less difficult if the Council has the wholehearted support of the Society's membership.



MORGAN'S POMADE

NEW HAIR DARKENING MOUSSE

Morgan's hair darkening mousse not only aids styling, giving lasting hold, but gradually darkens grey hair to its natural, youthful look.

175ml aerosol cans

More products of distinction

Morgan's Pomade 50, 100 and 200gm jars and 75gm tubes

Morgan's Pomade Perfumed 45 and 200gm jars and 75gm tubes

Morgan's Hair Colour Restorer 125ml bottles

Morgan's Hair Cream with Conditioner 125ml jars

Morgan's Hair Darkening Cream 100gm tubes 120ml jars

Morgan's Petroleum Jelly 200ml jars

Morgan's Styling Mousse 175ml aerosol cans

Morgan's Styling Gel 250ml bottles with pumps

Morgan's Hand Cream 75ml tubes

Morgan's Moisturising Cream 75ml tubes

MORGAN'S POMADE CO LTD
Colewood Road Industrial Estate
Swailecliffe, Whitstable, Kent
Tel: 0227 792761



Teacher Tested!

The only vitamins used in the famous school trial

AS SEEN ON T.V.



Tandem I.Q.
(Ideal Quota)

Vitamins for Schoolchildren
with over 30 vitamins and minerals

From your wholesaler
or direct from
Larkhall Laboratories.
Tel: 01-870 0971.

A vast selection of analgesic brands is now available OTC which can be confusing to patients and pharmacists alike. Dr Richard Taylor, who has since writing this become a clinical research scientist at The Wellcome Foundation, gives a few hints on product selection when treating aches and pains and raised temperature and discusses the recent developments in OTC analgesic products.

Analgesics represent the most significant sector of the lucrative OTC self-medication market and therefore attract a great deal of interest from pharmaceutical companies. A number of products have been introduced into the marketplace over the last few years. Not surprisingly, many have been supported by advertising, point of sale material, counter units, window displays and bonus deals.

The analgesic drugs, however, remain the same — aspirin or paracetamol (or combined with codeine), and more recently ibuprofen — the difference lies in the presentation, strength or formulation. What, if any, are the merits and drawbacks of the newer analgesic medicines and what should be borne in mind when selecting a product?

What's available?

Aspirin, paracetamol and ibuprofen, or codeine combinations, are employed to treat a variety of aches and pains and are particularly effective for headaches, in colds and 'flu, fever, toothache, teething pain, period pain, neuralgia and for relief of rheumatic and muscular pain. Headache accounts for almost half of all analgesic purchases with back/rheumatic pain, colds and period pain representing other common reasons for buying analgesics.

Aspirin is a highly effective, all-purpose pain reliever (general and rheumatic) for mild to moderate pain in adults, but because of the reported link with Reye's Syndrome is not suitable for children under 12 years.

Paracetamol admirably fills the gap left by aspirin as a safe, effective and adaptable general analgesic for adults and children which has antipyretic properties and so is especially useful for fever in children and teething pains in infants and for general pain relief in adults; its efficacy is similar to aspirin and it is less irritant to the stomach. A paracetamol-based preparation is really the only suitable choice when one product is required for all the family, but with little anti-inflammatory ability it is of limited use for muscular problems.

Ibuprofen is, like aspirin, a non-steroidal anti-inflammatory (NSAID) and is particularly effective in symptomatic treatment of mild to moderate rheumatic and muscular pain and associated stiffness with inflammation (eg pulled muscle) and in period pain. It has fewer side effects than aspirin but its anti-inflammatory ability is weaker.

Codeine is included in over the counter medicines in small amounts — often 8mg — together with aspirin or, more usually, paracetamol. Marginally higher amounts (10mg) are included sometimes at some expense to the second analgesic though the significance is unclear.

These compound analgesic preparations are suitable only for adults and older children and are of questionable advantage over single ingredient preparations though many people find them effective pain relievers; the combination probably at least has additive effects. They may be useful if simple analgesics are unsuccessful or in nagging pain

such as earache, toothache or rheumatism. Constipation with codeine is unlikely.

Feverfew, a herbal remedy, has been reported by some users to be an effective prophylactic treatment for migraine though controlled trials to establish efficacy are few in number and no medical claims are made. A lag period of up to a month apparently is not uncommon before benefit is noticed. Side effects of mouth ulceration, sore tongue and contact dermatitis have been reported. The dried leaf of the plant (a daisy) is available as a tea, in tablets or hard capsules, but doses are not standardised.

Aspirin, ibuprofen and paracetamol relieve pain or exert any anti-pyretic or anti-inflammatory action by inhibiting the synthesis and therefore release of prostaglandins (and thromboxane) from cells in response to traumatic stimuli (eg injury such as cuts or bruising). Prostaglandins increase vascular permeability and sensitise pain receptors to pain mediators such as 5-hydroxytryptamine, bradykinin and histamine. Prostaglandins are also implicated in fever. Aspirin (but not paracetamol) has central and peripheral actions which explains its anti-inflammatory properties. The mechanism for feverfew may not be unlike that of conventional analgesics.

Observations and questioning

Before recommending an analgesic certain things should be borne in mind. Pain is subjective, multi-faceted and a symptom of an underlying problem. It is outside the scope of this article to discuss how to distinguish between pain which requires referral and pain which is amenable to treatment. Nevertheless the location, nature (sharp, dull, aching), persistence, presence of other symptoms and severity of pain are pointers to the cause and its seriousness. Bear in mind the possibility of pain due to infection.

Headache is a case in point and may have a serious side and if in doubt referral is a must. In many cases headache will simply be due to stress of everyday living (tension headache) where muscles of forehead and neck tighten or spasm. Certain drugs (eg oral contraceptives), foods (eg cheese, chocolate), hunger, alcohol and prior to or early menstruation (eg pre-menstrual tension) can induce headache and identification of such causes may enable their removal.

The behaviour and appearance of children can often be a pointer to raised temperature for whatever reason. Crying for no apparent reason, a flushed or even pale appearance, hot to touch with the back of the hand, runny nose, coughing, complaints of a sore throat or persistent rubbing of ears or neck are signs that temperature is raised. Children under six months of age should be referred.

Developments

In order to cater for all eventualities some manufacturers have chosen to reformulate an existing product to provide solubility (eg Aspro Clear), provide a new flavour hot drink

with a different analgesic to the original (eg Beechams Hot Honey and Lemon), produce a new soluble paracetamol product (eg Paraclear), market an alternative solid dose form (eg Solpadeine capsules), or alter capsule coating for ease of swallowing. Other developments include the introduction of new products with higher strength, prolonged action formulations of an existing product (eg Anadian Extra, Proflex) or paediatric formulations (eg Junior Disprol). Sugar free-paracetamol preparations are now produced for children and adults.

The Contrapain range of analgesics is an example of another approach to pain relief. It consists of four products, each formulated to relieve the symptoms of a specific condition. Though this is not a new idea (eg Doan's backache pills) the concept of providing several products under one overall name for specific but different indications certainly is.

Many of the changes adopted are to improve absorption or make preparations more acceptable either by aiding swallowing,

OTC PAIN NEWER ANALGESICS

providing new flavours or reducing the potential for side effects and words like "new and gentle", "the most advanced form", "a visible achievement" are used in promotional literature. One wonders as to the influence of exclusion of certain proprietary compound analgesics from NHS prescribing. Contrapain, it appears, was introduced in response to market research findings which indicated that many consumers purchase analgesics which are for specific types of pain.

Choosing a pain reliever

In many cases analgesic purchases involve a direct request for a particular product. Often the choice is based on past experience, recommendation by family and friends and successful advertising. However, patients may not entirely understand differences in treatments which is not surprising given the multitude of products on the market. This is where a pharmacist can help.

When advice is requested the choice of compound rests initially on the type of pain and then dose form or presentation becomes important in selecting a particular product. Other factors are accompanying symptoms, patient peculiarities, other drug treatments. Generally speaking the choices come down to child or adult, whether a soluble form is available or desired, if not capsule or tablet. Other considerations are perceived effectiveness by the patient and professional endorsement based upon past experience. In almost all instances the requirements can be met (see table 1).

The newer formulations may not necessarily provide more effective pain relief than simple established analgesics but specific formulations may be appropriate in those troubled by side effects, who prefer capsules to tablets for example or who require a mild or stronger product.

Soluble forms do have benefits in terms of ease of administration, palatability and soluble aspirin preparations can improve gastric tolerance. Soluble preparations are clearly beneficial for children, and many adults prefer them too. Solubility should ensure speedier relief though this is not always proven. Totally soluble products producing a clear solution are

perhaps advantageous over dispersible preparations which may leave a gritty residue (awkward if throat is sore) and an aftertaste. The merit of effervescent highly buffered preparations, whether of aspirin or paracetamol, is their usefulness after too much to eat or drink where the alkaline base buffers gastric acid. One drawback with soluble formulations is that a glass of water is not always available so a handy pocket-size tube of aspirin for dispersion in the mouth could prove a suitable choice for an adult in such circumstances.

Soluble paracetamol formulations have in the past had the stigma of an unpleasant bitter taste and newer formulations claim improved palatability. In infants or young children this is tackled by flavoured sugar-free elixirs and the new soluble, slightly effervescent tablets; there are also versions intended for older children or adults.

Ibuprofen is not available in soluble form, presumably for pharmaceutical reasons. Developments are increased strength in sustained release capsules for prolonged relief for up to 12 hours. This is useful at bedtime for night-time respite.

Medicines intended for common cold, catarrh or sinus congestion frequently contain analgesics in addition to other ingredients where a degree of pain relief may be required or where aches and pains and raised temperature might be expected; for example, pseudoephedrine or phenylpropanolamine to treat nasal congestion or dextromethorphan for a cough. Caffeine in some preparations is said to potentiate analgesic activity. Buclizine is added to restore gut motility which is reduced in migraine and which impairs the absorption of analgesics, and doxylamine is included to provide additional action against muscle tension in tension headache.

How should products be used?

Aspirin and paracetamol are usually present in strengths of 300mg and 500mg respectively in analgesic preparations. Paediatric formulations usually contain 120mg paracetamol per 5ml or soluble tablet. For ibuprofen 200mg and, more recently 300mg are the norm. For aspirin, paracetamol and

compound analgesics the adult dose usually is one or two tablets/capsules every four to six hours when necessary (maximum four doses a day). Soluble and effervescent formulations require plenty of water. Products like Solmin should be dispersed on the tongue with water.

For children under 12 years old aspirin is now contraindicated. Paracetamol doses in children's medicines are multiples of 120mg depending on the age of the child with a maximum of four doses in 24 hours. For ibuprofen two 200mg tablets or 300mg capsules should be taken initially followed by one tablet every four hours or two capsules every 12 hours if necessary. Gargling with two soluble aspirin every four to six hours can help a sore throat.

Adverse effects

The availability of fully soluble, and especially effervescent highly buffered formulations of aspirin, has effectively solved the problem of gastric irritation experienced by some and thought to result from undissolved aspirin in contact with gastric mucosa or to diffusion of acid back into the stomach lining. However, those with stomach ulcer or who easily experience stomach upset should not be given aspirin or ibuprofen. Aspirin is not advised during the last three months of pregnancy.

Aspirin also should not be used in patients with blood disorders such as haemophilia and avoided with warfarin as it interferes with blood clotting. Aspirin is not suitable following a tooth extraction because of risk of bleeding or in gout due to inhibition of uric acid excretion.

Occasionally aspirin may produce a skin reaction or cause breathlessness in asthmatics. Ibuprofen, with side effects similar to aspirin, is not suitable if aspirin is not tolerated and also should be avoided in asthmatics and those with stomach troubles. Paracetamol is a suitable alternative. Aspirin, and particularly paracetamol, are dangerous in overdose (hence the pharmacy only designation of larger packs) and storage away from children is advised.

Counselling

1 **Gastric intolerance** of aspirin may be minimised by selection of a soluble or effervescent preparation. If this occurs with ibuprofen advice to take with food or milk should help.

2 **Migraine attacks** are relieved most effectively by earliest intervention so advise patients to carry tablets with them.

3 **Analgesics** should be stored away from children.

Guidelines to OTC preparations

1 Most OTC analgesic medicines contain aspirin, paracetamol or ibuprofen or are compound analgesics of codeine with paracetamol in similar amounts.

2 Aspirin and paracetamol are good general simple analgesics. Paracetamol is the only choice for fever or pain in children.

3 Ibuprofen is the choice for muscular aches and pains or period pain and new forms of higher doses in slow release formulations give prolonged relief.

4 The revised or new formulations can be more sophisticated and do offer some advantages in terms of palatability, ease of taking, use for specific types of pain or to minimise gastric upset. They are often more expensive but not excessively so.

Table 1: OTC analgesics and newer medicines

Type of analgesic	Comments	Points to note
Aspirin	Soluble forms quickly absorbed — no gastric problems. Tube handy for pocket	C/I children <12 yrs. Avoid in stomach upset, dental extraction, blood disorder, asthma
Paracetamol	For children, fever, family use. New effervescent/soluble forms not bitter and rapid absorption. In medicines for cold/blocked nose (see below)	Few side effects
Ibuprofen	Similar to aspirin. For rheumatic muscular, period pain. Prolonged action capsules available.	Avoid if stomach troubles. Variable response
Compound analgesics: Paracetamol or aspirin with codeine +	If simple analgesics not effective or acute/sharp and muscular pain	Not young children
Combination medicines: Paracetamol plus decongestant/cough ingredient etc	Aches and pains in cold/blocked nose/head	Some may cause drowsiness
Natural products	Beneficial for unresponsive migraine?	Mouth ulcers/rash/gut problems in some users

This sore throat lozenge is extremely successful

24 THROAT
LOZENGES



ANTIBACTERIAL

Merrocets[®]

Merrell Dow[®]

Soothing Lozenges for Sore Throats

ANTIBACTERIAL
Merrocets[®]
24 THROAT LOZENGES IN STRIPS OF 8

This one sells almost twice as well

24 THROAT
LOZENGES



ANTIBACTERIAL

Merrocets[®]

Merrell Dow[®]

Soothing Lozenges for Sore Throats

ANTIBACTERIAL
Merrocets[®]
24 THROAT LOZENGES IN STRIPS OF 8

Research shows that pharmacists who display
Merrocets sell on average 85% more than
those who don't. Display pays!

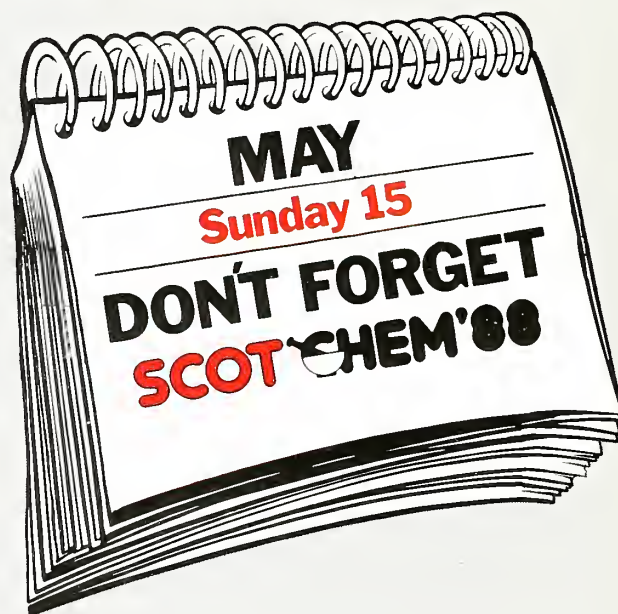
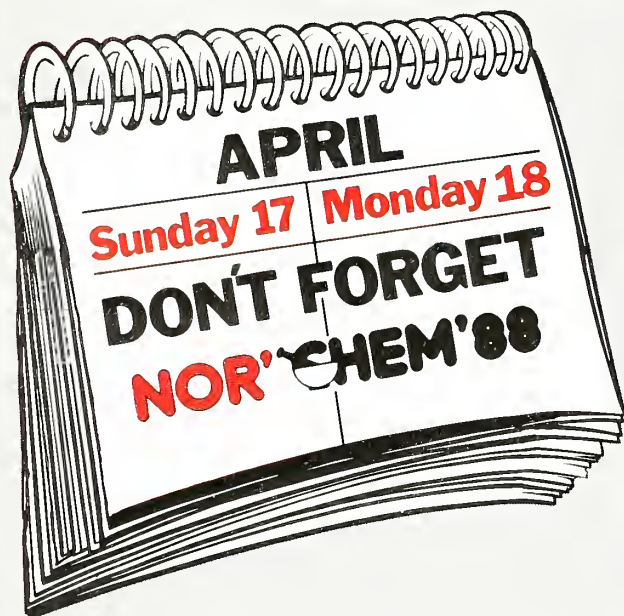
**Merrell-
Medicines**
Confidence in pharmacy

Trademarks: Merrocets, Merrell, Dow.

MERROCETS ARE SUPPLIED IN PRE-PACKED DISPLAY OUTERS, AND DISPLAY MATERIAL IS AVAILABLE FROM MERRELL DOW.

R_x PRESCRIPTION FOR PROFIT

Make a date in your diary.



You cannot afford to miss your own exhibitions for the Retail Chemist and allied trades. Come and see what's in store to help to increase your profitability.

NOR'CHEM'88

THE NORTHERN RETAIL CHEMISTS EXHIBITION

G-MEX Exhibition Centre - Manchester 17 & 18 April 1988

SCOTCHEM'88

THE SCOTTISH RETAIL CHEMISTS EXHIBITION

Scottish Exhibition and Conference Centre, Glasgow 15 May 1988

FREE ENTRY — Tickets at the door — **FOR VISITOR** information/ticket leaflet.
Telephone 01-316 5567

SPONSORED BY
**CHEMIST &
DRUGGIST**

MGB
EXHIBITIONS
Profit from the experience

Severance

I was a Unichem member for six and a half years until this March 1, giving them 70 per cent of my wholesaler business throughout that time, in return for their acting as guarantors for a bank loan to purchase my small seaside pharmacy, now paid off.

On February 23 I received a telephone call from the Unichem branch manager informing me that my medical purchases for February fell short of the £3,000 threshold level communicated in mid-January, and that unless I reached that figure I would not be supplied after February 29.

I poured every possible order into Unichem, losing my second-line wholesaler discount, but to no avail. So I had effectively been given one week's notice in the shortest, most dead month of the year in a seaside pharmacy.

Speaking to the branch manager on March 3 he confirmed severance, but was prepared to reconsider it upon my delivering up to him the previous twelve months FP 34 forms. I thought this a bit of a cheek, but what really angered me was a letter from the group secretary received the following day, implying that the decision to "abdicate" was mine. The whole tone of the letter was both sickly condescending and unbelievably high-handed.

I have transferred all that business to Macarthy's and shall never deal with Unichem again.

G. Edwards
Brighton

A plea for sanity

I had intended to sit tight in my drey while the battle of the giants raged below me, but some of the missiles are rocking my tree and I don't like it a bit. I am still naive enough to believe that it is the independent wholesalers who really have the interest of community pharmacy at heart, and are therefore worthy of our support. Who can blame me for this idea when I was told by one of the giants, about seven years ago, that as I was a rural pharmacist it was not worth sending a van to service my account — worth about £10,000 per month.

I could say that it is immaterial to me whether Macarthy, Unichem or Vestric comes out on top, but of course that is not true. I can hardly believe what I read in the Press every week with the protagonists showering bouquets upon themselves and brickbats on

their various opponents.

Has nobody else the guts or the common sense to stand up and yell, "Stop before you sink us all"? Have we not learned from bitter experience that the inevitable outcome will be that the lawyers will get fat, the DHSS will win, pharmacy and public will lose again.

One can imagine the antics at the new DHSS HQ, like a scene from Macbeth as the cauldron is stirred to the ritualistic chant of "Divide and Conquer!" Please will somebody save us from the greed of those who desire to get rich quick and don't care about the future of pharmacy.

Squirrel Nutkin

Legal beagle?

I would like to make an observation on Xrayser's allowing prescriptions to be handed out in his absence, and which Alan Nathan thinks is illegal (*C&D* February 20, p337). The law of contract applies to the sale or supply of medicine just like any other merchandise.

When the prescription is ready for handing out, and the patient is not waiting, the pharmacist is faced with a professional decision. Does he need to counsel the patient? If not, and he then places the prescription in a safe place to await collection — ie it is put at the patient's disposal — then the title in the goods passes to the patient. Then, for the patient to take delivery, the pharmacist's presence is not needed because the sale (supply of medicines is a retail sale) is completed when the title so passes.

The decision Xrayser takes is one of professional judgment and not one of legality.

K.J. Knight
Crewkerne

Turnover boost

Our local residential care homes for the elderly have been informed that the local area health authority is to cease the free supplies of incontinence products to the privately run homes.

As undoubtedly this will be happening in other districts, here is an excellent opportunity for community pharmacists to offer a replacement service, and also boost their turnover and profits! In the Wolverhampton area, this could mean an extra £1,000

annually per pharmacy.

Indeed, our local large branch of Boots has not been slow off the mark, having circulated all the local homes with a list of their incontinence range.

David Thomas
Wolverhampton

A&H breathe easy...

We were interested to see the comment on Ventodisks contained in the article "Topical Reflections — Breathe in", in the March 5 edition of the *Chemist & Druggist*. It was encouraging to see that your correspondent found the instructions to be clear and easy to follow and that he anticipates little problem in demonstrating the use of the Diskhaler device to patients.

The need to avoid removing the wheel or discarding it is highlighted in the instruction leaflet, both when fitting the first Ventodisk and again when replacing the used disk with a new Ventodisk. Providing patients follow the instructions carefully, it is unlikely that many problems will arise. GP and hospital handling studies in more than 900 patients did not show any tendency for patients to discard the wheel.

From experience gained so far in over 2,500 patients we know that, overall, many patients of all ages were able to use the Diskhaler device after only reading the leaflet. After a maximum of two subsequent demonstrations, 98 per cent could use the device correctly.

G.J. Martin
Medical Services manager, Allen & Hanburys Ltd

No problem

We have the answer to Xrayser's problem of February 27, 1988 in relation to the erratic supply of generics. He need no longer order large quantities of generics and risk being over-stocked with the possibility of getting product of a different appearance.

Xrayser can be sure that the product we supply is the same shape, colour and size as the goods we supplied last time.

N.A. Saul
Marketing manager,
Hillcross Pharmaceuticals Ltd

BUSINESS NEWS

New insurance scheme for pharmacies

A new shop insurance scheme, available to all AAH group wholesale customers, has recently been set up by Statim Finance, part of AAH Pharmaceuticals Ltd.

Statim, who launched Statim Reflex pension scheme last month (*C&D*, February 13, p293), say this second financial initiative developed in conjunction with A.E. Insurance Brokers, offers benefits including cover of refrigerated stock up to £400, insurance against larceny, and business interruption cover up to £250,000. It involves a legal advisory scheme and under certain circumstances additional discounts for multiple shops and commercial vehicle insurance.

All AAH customers will be receiving a brochure with details of the scheme, and a freephone number for information (Freephone Statim Chemist-shield) has been set up.

On completion of a proposal form, A.E. Insurance will present a quotation. Statim suggest interested parties should wait until their present scheme expires as there is unlikely to be a price increase for at least a year.

Evans sell Haliborange

Evans Healthcare have sold Haliborange to Reckitt & Colman for an undisclosed sum.

The company comments that the sale is consistent with its policy of not actively competing in the branded vitamin supplement market, which it says is becoming progressively concentrated in non-pharmacy outlets. Evans sold the two other vitamin brands, Minadex and Adexolin, to Seven Seas/Marfleet last September.

The Budget: what's in the balance for pharmacy?

The Chancellor's radical reforming Budget lived up to its claim on Tuesday. But little in it lived up to pharmacy's specific pre-Budget hopes: no writing down allowance on retail buildings, no updating of the income threshold for "higher paid" employees, no increase in mortgage relief, no change in repayment procedures for traders.

But the Chancellor Nigel Lawson was keen to stress that several of the proposals were designed to help new and small businesses, whose encouragement is central to Government policy. And even the controversial abolition of the higher rates of income tax was proposed as an "encouragement to enterprise in Britain". With £4 billion to play with, the Budget package included:

- Capital gains tax retirement relief is to be extended so that on top of the exemption, 50 per cent of any gain between £125,000 and £500,000 will be completely free of tax — a move designed to help the small businessman by removing the disincentive of heavy tax liability when selling up at retirement. And capital gains tax on inflation-caused gains is to be eliminated. Gains before April 1982 are to be exempt, though the threshold for non-taxable gains is to be put back to £55,000.

- VAT threshold was lifted to £22,100, the maximum permitted under European Community law. The VAT rate remains at 15 per cent. Cigarettes to go up 4p for 20; cigars 5p for five, a pint of beer or cider up 1p and wine between 4-6p. Lower rates on low alcohol drinks constitute a move designed to encourage young people in particular to change their drinking habits.

- The rate of corporation tax for smaller firms is to be reduced to 25 per cent, in line with the new standard rate of income tax.

Otherwise the rate remains unchanged at 35 per cent, though Mr Lawson noted earlier reduction in its level had served to encourage business investment.

- Improved targetting of the Business Expansion Scheme so that smaller companies, and those outside the South East, will not be left behind when seeking equity. A £500,000 limit is to be placed on the amount any company can raise under the scheme in any year. The BES will now also include companies specialising in letting of residential property on a new tenancy assured basis, in a move to increase property for rent and hence labour mobility.

- Motorists with company cars will now pay double the amount of personal tax for the privilege, with hints of further clampdowns on perks in the future. Entertainment of overseas customers will no longer be allowable for tax.

- Abolition of capital duty (1 per cent) previously paid whenever companies raised new capital when starting up or when issuing new shares.

The subject of the Health Services was a primary factor in disrupting the Chancellor's speech in the Commons on Tuesday. But despite the cries of "what about the NHS" and "shame" from the Opposition, Mr Lawson was not to be drawn. At the outset of his speech he reminded MPs of the pledge in his Autumn statement to increase public expenditure by £2.5 billion, which would involve spending £1,100m more on health than in the year now ending.

In the days preceeding the Budget, polls had indicated up to 80 per cent of people would be willing to forgo tax concessions for the sake of the NHS. It will be interesting to see, then, if a campaign for "health not wealth" being advocated by religious leaders in Manchester will work. The idea of Rabbi Robert

Silverman, it urges people in industry, commerce and the arts to donate to the health service every penny saved from tax cuts.

The NPA told *C&D* this week it was disappointed its submissions to the Chancellor had not been acted upon (see *C&D*, February 13 p292). "We are pleased the anomaly whereby double mortgage relief for unmarried couples has been removed but would like to have seen the level of relief increased to £60,000," said the Association's assistant financial officer George Raven. "Overall the Budget will not have a great effect on our members. Capital gains tax and retirement relief will help when selling up, and tax cuts might increase incentives, but only marginally," he added.

The National Chamber of Trade, which had similar hopes to the NPA was also disappointed in some of the omissions from the Chancellor's list. "But on the whole we are quite happy. It was much as we expected," said their director general Bernard Tennant.

"We particularly welcome initiatives for existing businesses like the decrease in corporation tax, rather than an emphasis just on start-ups," he said.

Lloyds are to offer debit card

Lloyds Bank are to offer a debit card in competition with Barclay's Connect card (*C&D* October 10, 1987, p751.)

Like Connect it will be operated through the Visa International payment scheme and its main function will be to replace payment by cheques in shops. It will be used through Visa retail outlets and for cash withdrawal from Lloyds, Barclays and The Royal Bank of Scotland cash machines as well as being a £50 cheque guarantee card.

Retailers are likely to pay the same commission as with Connect cards. But it will also offer an overdraft facility equal to one month's salary.

Record sales for Kodak in all areas

Kodak Ltd has reported record sales of £733m in 1987.

UK sales were £351m, 15 per cent higher than in 1986, despite strong competition in all market areas, say Kodak. Export sales totalled £382m, representing an increase of 7 per cent. Profit after tax increased by 83 per cent to £85m.

Kodak say the boost in home sales was due to higher sales in nearly all areas, in particular Kodacolor film, Ektacolor paper and continuing growth in copiers. There was also good growth in processing and printing.

Company chairman and managing director Erroll Yates commented: "For Kodak Ltd, 1987 was a year of considerable change and achievement on which to build for the future. Our top priority is the same for 1988 — quality and service to our customers."

Worldwide, Eastman Kodak Company reported record sales of \$13.3 billion for 1987, up 15 per cent.

Pharmacia lift profits by 10pc

Pharmacia have increased group profits for 1987 by 10 per cent to SKr905m (\$150.8m) after net financial items.

Group sales increased by 67 per cent to SKr6,101m. Western Europe (excluding Sweden) was their largest regional market with a share of 42 per cent of sales.

The company says that the integration of Leo last year helped profits because of Leo's anti cancer drug. However, sales to the United States fell by 4 per cent in krona terms due to the lower dollar. A dividend of SKr1.75 per share (1.55) is proposed for the 1987 fiscal year.

Broker supports £65m price tag for Unichem

Unichem members are this week presented with yet another option to consider in their deliberations on a move to merge with Macarthy.

A valuation from the independent broking house of Robert Fleming puts a price of £64.2m on Unichem, and so advocates Macarthy's proposed offer of £65m as "entirely credible and fair".

Fleming say some leading institutions have cast an eye over Unichem's brokers Phillips & Drew's renewed £100m valuation reported last week, and raised questions regarding its realism. They themselves consider it "excessively high". "Key to the success of Macarthy's bid will be the influence of the many documents from both parties on Unichem's members," say Fleming. "One of the pivotal influences will be Unichem's valuation." Hence their independent examination, looking at the bid from the point of view of Macarthy's investors.

While the brokers said they could not comment on Unichem's strategy or its effect on pharmacies, they see a take-over as financially beneficial to Macarthy and their investors. "We believe the commercial logic for the acquisition is powerful, and substantial benefits would flow from the synergies and rationalisations that would arise from the integration of the two wholesaling operations."

In their report Fleming question Phillips & Drew's use of Unichem's excellent sales and profit growth to value the co-op as if it were a public limited company. This growth, they suggest, has been achieved by using the friendly society status to offer financial incentives.

The 30 per cent bid premium Unichem have mentioned in their defence document Fleming consider inappropriate partly on the basis that they see no other bidders beside Macarthy likely.

They predict Unichem's yearly sales growth into the 1990s

if they were trading as a plc would be at about 6 per cent, and profits growth at around 7.5 per cent. They suggest a valuation of £56.7m, boosted to £64.2m because of the exceptional gain, which they see as a result of increased business since January. They conclude by saying a revised bid of £75m, which takes into account Macarthy's fallen share price and a small bid premium, would be "very attractive".

Macarthy's chairman Nicholas Ward welcomed the report which confirmed their own views on the valuation. He would not give details of the response by Unichem's members so far to his suggestion that they demand a meeting to discuss the merger, and when questioned about the possibility of a revised bid said that if Unichem wanted to re-enter negotiations their Group would be happy to look at their proposal to see in what way the balance could be improved.

In answer to Unichem's view of the division between the two groups, Mr Ward underlined that Macarthy's retailing and wholesaling operations are run entirely independently, and said he believed that as a plc Unichem would have to make a move into retailing. "It was not so long ago that Unichem made an unsuccessful bid to purchase Drummonds," said Mr Ward. A new enlarged group would be ideally placed to meet this threat.

Phillips & Drew's response to Fleming's inquiries see them sticking to their guns, seeing their £100m valuation of Unichem as "perfectly reasonable" (they refer to profit forecasts for Macarthy which stood at £11m at the same time as its capitalisation was £90m). And on criticism of using the scheme in valuation they say: "The fact remains that the scheme does exist. The £12m pre-tax profits are based on the level of business already being achieved. It does not rely on further gains." And, they add, they do not predict Unichem losing their market share.

Possible new complaint from AAH

AAH is now considering filing a new complaint about Unichem's marketing of its share scheme; this time to the registrar of friendly societies.

The complaint concerns some advice thought to have been given to potential customers suggesting they structure each new outlet as a separate limited company to allow them to qualify for more than 10,000 shares, the maximum entitlement under the scheme.

Unichem's managing director Peter Dodd said this advice might well have been given by a Unichem employee, but he added that membership must ordinarily be taken out for each legal entity; hence a chain trading under a number of separate limited companies is required to take out a membership for each one under the rules of the friendly society. "The registrar would have to explain to me how this could be avoided," said Mr Dodd.

Meanwhile AAH are expecting news any day from the Department of Trade & Industry regarding their complaint that Unichem was breaching the Prevention of Fraud (Investments) Act (see *C&D*, March 5). They have had a preliminary meeting with the OFT.

AAH claim that Unichem's circular responding to the Macarthy bid (see *C&D*, last week) admits taxation implications for subscribers, though it does say these would be small.

Wound up

A pharmacy company in Wellingborough was compulsorily wound-up in the High Court on February 24, after a successful petition by Unichem.

Unichem alleged that, despite demands for payment, the company — Summerfield & Sparkes Ltd, High Street, Irthlingborough — still owed a sum of money in respect of a judgment debt.

ABPI welcomes Patent passing

The Association of the British Pharmaceutical Industry has welcomed the completion of the Report Stage of the Copyright, Designs and Patents Bill last Thursday with its repeal of the licences of right provisions intact.

ABPI spokesman Peter Lumley told *C&D* that the Association welcomed the statement by Government Minister Lord Beaverbrook "which reaffirmed the Government's commitment to repeal the licence of right provisions. Obviously, the Bill still has to go to the House of Commons but the fact that the Government has now demonstrated its appreciation of the research argument is a matter of encouragement to us."

The major attack on the licence of right provisions — by which pharmaceutical products

patented before 1978 which were given an extra four years of patent life by European Convention can be produced by manufacturers other than the originator on payment of a licence fee — came in an amendment from Lord Rea, which proposed that any changes should not apply to products that have been licensed for sale for 10 years.

Lord Rea said that the argument against licences of right arose because of the long period of development between the patenting of a product and its marketing. He appreciated that products entering the UK market last year had only five years of full patent protected patent term left.

"The ABPI claims, with some justification perhaps, that that is not enough to recoup the costs of research and development of the drug concerned," said Lord Rea. But his amendment would continue to repeal licences of right, established by the 1977 Patents Act, for all products until they have had at least 10 years of protected patent life.

Lord Rea quoted the example of Zantac, which, he said, by the time licences of right become available in 1993, will have had 12 years of protected patent life. "Sales of the drug are running at

£80m per annum and have rapidly escalated to this level in recent years." He suggested that if licences of right were given for Zantac in 1993, with assumptions of a 25 per cent market share for generics selling at a third below Glaxo's price, and sales at today's levels, a saving would accrue of £6.6m per annum on Zantac alone.

Glaxo's profits held back as they invest

A 50 per cent increase in research and development expenditure was seen to be a factor holding back Glaxo's interim profits, announced this week.

Pre-tax profits of £397m were reported on sales of £924m for the six months to December 31, 1987. Exchange rates were also seen to have a detrimental effect. If the turnover was measured using last year's exchange rates

they would have been recorded at £1,049m, an increase of 20 per cent, said Glaxo's chairman Sir Paul Girolami. He reiterated his previous indications that there was to be an inevitable slowing down in the Group's previous exceptional rate of growth.

"Research and development expenditure amounted to £101m in the six months, compared to £67m in the same period last year," said Sir Paul. The company expects this to reach £220m at the end of the financial year in June, and it is a level likely to continue as Glaxo have a number of drugs planned for introduction in the next few years, chiefly for treatment of anxiety, heart disease and migraine.

Sales of products grew, though more slowly. Zantac sales increased by 7 per cent to £441m, and sales of systemic antibiotics and respiratory products by 12 and 15 per cent to £125m and £211m respectively.

The company announced a 2 pence rise in the interim dividend, to 7 pence to be paid on May 20.

Changes to the Board have come about following the resignation of John Farrant. And Dr Ernest Mario, has been elected to the Board with effect from April 1.

COMING EVENTS

Midlands study day

"Change and innovation in pharmacy practices" is the theme of the regional education day to be held at Aston University on April 28, from 3 to 9pm.

Topics include computerised patient record systems, information for cancer patients and leaflets for lithium treatment. There will be an address by Mrs Marion Rawlings, PSGB vice-president followed by a panel discussion which will include Mr S. Axon of the PSNC and Dr Peter Noyce, deputy chief pharmacist, DHSS. Further details from Janet Allen — there will be no charge for the day (tel: 021 359 3611 extension 4202).

Back to work

Sunderland Polytechnic is organising a Return to Pharmacy Practice course. The course will run from May 14-21 and will be repeated again in September 1988. The fee is £240 excluding accommodation. Closing date for applications is May 4.

Inquiries to Mr J.F. Smith, Director of Continuing Education, (tel: 091-567 6191 Ext 203).

Monday, March 21

Mid Glamorgan East Branch, Pharmaceutical Society, the Globe Hotel, Pontypridd at 8pm. "Symptoms and treatment of hydatid cysts due to dog tapeworm infection" by Mr P.A. Braithwaite, consultant surgeon.

East Kent Branch, Pharmaceutical Society, Postgraduate Medical Centre, Kent & Canterbury Hospital, at 8pm. Dr H. Richardson talks on "Drug abuse by juveniles".

Plymouth Branch, Pharmaceutical Society, Board Room, Derriford Hospital, Plymouth at 8pm. Mr I. Harrison (School of Pharmacy Wales) speaks on "Legal and ethical aspects of counter prescribing".

Tuesday, March 22

Hull Pharmacists' Association, general meeting at the Postgraduate Centre, Hull Royal Infirmary, Anlaby Road, at 8pm.

Wednesday, March 23

West Metropolitan Branch, NPA, joint meeting with West Metropolitan Branch, PSGB in the Board Room (North block), the Brompton Hospital, Fulham Road, London SW3 at 6.45pm. Mr T.P. Astill, director speaks on "What's in the limelight".

Thursday, March 24

Birmingham Branch, NPA, joint meeting with Birmingham Branch PSGB, at the Birmingham Medical Institute, 36 Harborne Road, Birmingham, at 7.15pm. Speakers are Brian Spencer of Vetchem, Neil Robertson and Rob Morris of Hoechst

Animal Health. Buffet cash bar.

Lincolnshire Branch, NPA, at the Postgraduate Centre, Lincoln Hospital at 7pm. Speakers, Douglas Davidson, of Vetchem and George Gunn, veterinary adviser to Janssen Animal Health. Buffet.

Dundee Branch, Pharmaceutical Society, Lecture Theatre 3, Ninewells Medical School at 7.45pm. "Home Safety", by Mrs Linda Stone, PSGB Council member.

Advance Information

British Association of Pharmaceutical Physicians. Symposium on "trends in clinical medicine" at the Royal Society of Medicine, 1 Wimpole Street, London W1, June 8-9. Details from Mrs J. Wase-Bailey (Tel: 01-491 8610).

British Chemical Distributors & Traders Association. Trade fair and conference for the chemical industry, "Chemfair '88" will be held at the Penta Hotel, Heathrow, October 11-13. Areas to be covered include production, packaging, storage, distribution, and labelling regulations. Information from Colin Wainwright (tel: 01-686 4545).

Cosmetic Toiletry & Perfumery Association. "Rendez-Vous de la Beaute" an international exhibition for the cosmetic, toiletry and perfumery industry, from September 29 to October 2, in Nice. Contact: International RVB Organisation, 22bd Risso, 06300 Nice, France (tel: 93 55 61 21).

Konica UK Ltd. Roadshows for the Nice Prime mini lab system: at the Moat House Motel, Southampton, April 12 (1-9pm) and April 13 (10-am-9pm); the Grand Hotel

Leicester, April 19 (1-9pm) and April 20 (10am-9pm); the Britannia Hotel, Birmingham, April 26 (1-9pm) and April 27 (10am-9pm); and at the Copthorne Hotel, Glasgow, May 11 (1-9pm) and May 12 (10am-9pm). Konica will also be at the Photography At Work show at the Exhibition Centre, Harrogate, from May 16-19. Free invitations from Konica, Plane Tree Crescent, Feltham, Middlesex. **National Association of Health Authorities**. General meeting and conference on "new horizons in acute care", at the Harrogate Centre, Harrogate, from June 22-24. Fee £44.85, accommodation from £40-75. Applications by April 1. Further details from NAHA, Garth House, 47 Edgbaston Park Road, Birmingham B15 2RS (tel: 021 471 4444).

PSNI discos and dinners

The Pharmaceutical Society of Northern Ireland is to hold a symposium on "developments in pharmacy practice" on June 26, at the Queens Elms halls of residence, Belfast. There will be a treasure hunt and disco on June 25. Details of both events to follow later.

The "President's dinner" is to be held on March 23, at the Culloden Hotel, at 8pm. For more information contact Mr D. Lawson, secretary and registrar (tel: 0232 326927).

Above average growth forecast for chemists

The economy is set to grow at a satisfactory, although rather slower rate in the year ahead. That is the latest view expressed by the Bank of England. But it goes on to warn of further weakening in the overseas trade balance.

Another downbeat note is struck by stockbrokers Phillips & Drew, who warn of the danger that "the profits gravy-train may soon run out of puff", bringing a substantial reduction in profits growth during the course of the year.

But chemists shops will be one of the faster growing retail sectors in the period 1986 to 1993, according to a new report from Staniland Hall Associates. On overall retail sales they forecast a 3.7 per cent average yearly growth.

The authors of the report, *Retailing in the UK to 1993*, also predict that the next five years will see a shake-out, rationalisation and consolidation in British retailing, with management devolution, market segmentation away from universal providers, and wider use of electronic technology.

Consumer spending rose 5 per cent last year, but estimates for the fourth quarter suggest a slowdown. Nonetheless, sales

in December turned out to be better than official estimates; instead of a 1 per cent fall in the volume of spending in December, it was actually unchanged from the high level of November.

For chemists, the value of retail sales, excluding receipts from the NHS, increased by 29 per cent on the month, to a level 10 per cent above that of 12 months before.

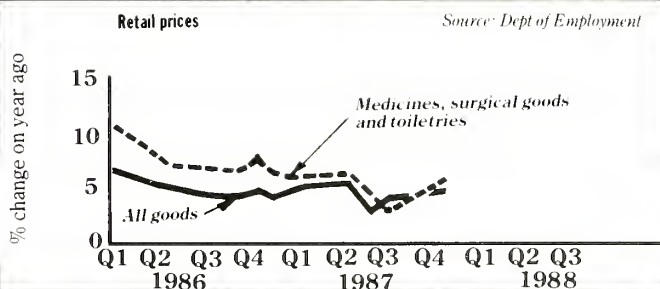
The latest figures from the High Street, covering January, suggest a sharp rise in spending — up $\frac{3}{4}$ per cent on the month to a new record level. Sales volume in the three months since November is now officially estimated to have been nearly 6.5 per cent higher than at the same time a year earlier.

While the overall rate of inflation dipped again in January, the prices shoppers had to pay for chemists goods were 5 per cent above those of a year before: December saw an increase of 4 pc.

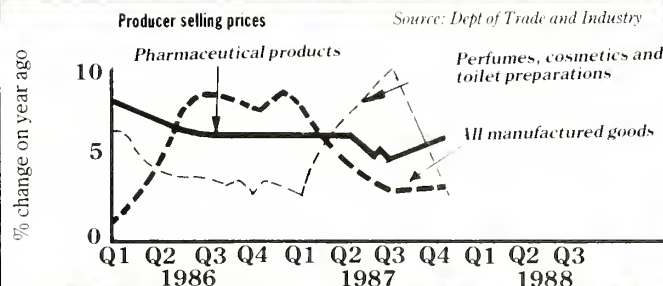
The annual rate of increase of prices charged by British manufacturers for finished products fell to 3.8 per cent in January, from 3.9 per cent the previous month. Meanwhile, the factory-gate price of pharmaceutical products is continuing its steady rise and is now 7 per cent higher than a year ago. The comparable figure for perfumes and toiletries shows a sharp decline, to a level 2.3 per cent above that of 12 months ago. Costs of fuel and raw materials are increasing at a 3.8 per cent rate in the case of pharmaceutical manufacturers, and by 4.6 per cent for the makers of perfumes and toiletries.

But pay increases, the other main factor in manufacturers' prices, are now running dangerously high, at more than 8 per cent, after a long period of stability at 7 per cent.

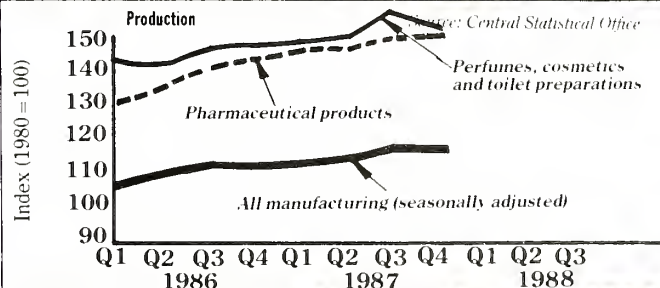
Chemists' goods price increases speed up



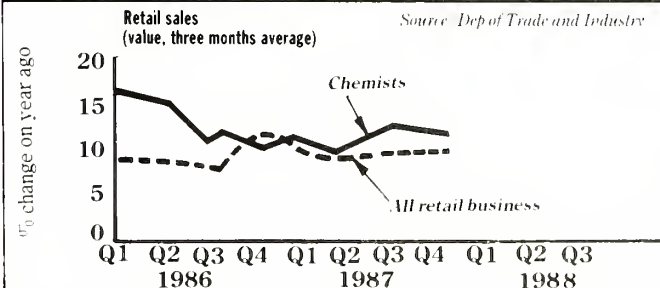
Perfumes, toiletries prices rises drop back



Production of pharmaceuticals strengthens



Retail chemists' sales growth declines



BUSINESS STATISTICS

	Period	Latest	Previous	% change on year
Prices and Costs				

Retail prices (Jan 1987 = 100):

all items	Jan	103.3	103.3	3.3
chemists goods	Jan	105.1	104.7	5.1

Producer prices (1980 = 100):

manufacturing industry, excl food	Jan	152.2	150.7	4.8
chemical industry	Jan	142.9	141.3	6.2
pharmaceutical products	Jan	155.0	151.5	7.0
toilet preparations for men	Jan	177.3	177.3	9.9
other toilet preparations	Jan	147.7	146.5	3.0
surgical dressings	Jan	177.6	176.4	6.9
photographic materials and chemicals	Jan	149.2	147.8	4.3

Average earnings* (Jan 1980 = 100):

distribution and repairs	Dec	201	193.8	7.4
--------------------------	-----	-----	-------	-----

Output & overseas trade

Manufacturers' sales* (£m):

pharmaceutical products	Qtr 3	1044	1054	9
perfumes, cosmetics and toilet preparations	Qtr 3	382	331	10

Home sales* (£m)

pharmaceutical products	Qtr 3	836	840	11
perfumes, cosmetics and toilet preparations	Qtr 3	356	292	11

Exports* (£m):

pharmaceutical products	Qtr 3	422	420	7
perfumes, cosmetics and toilet preparations	Qtr 3	106	95	13

Imports* (£m):

pharmaceutical products	Qtr 3	214	206	13
perfumes, cosmetics and toilet preparations	Qtr 3	80	56	18

Sales

Consumers expenditure (£bn 1980 prices)

Retail sales* (value 1980 = 100):	Qtr 4	43.5	43.4	5.3
all retail businesses	Dec	245	198	9
chemists	Dec	306	237	10

Business indicators

Average earnings index (1980 = 100)	Dec	210	207.3	8.6
-------------------------------------	-----	-----	-------	-----

Capital expenditure (£m 1980 prices):

distribution	Qtr 4	1152	1182	1.6
--------------	-------	------	------	-----

Stock changes (£m 1980 prices):

wholesalers	Qtr 4	87	102	—
retailers	Qtr 4	12	335	—

Unemployment (UK per cent)

	Dec	9.7	9.7	-16.4
--	-----	-----	-----	-------

Sources: Central Statistical Office, Department of Employment, Department of Trade and Industry. All figures seasonally adjusted except where marked*

CLASSIFIED

Post to Classified Advertisements, Chemist & Druggist,
Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW.
Telephone Tonbridge (0732) 364422. Telex 95132.
Ring Jim Page Ext 216 for further information
Publication date Every Saturday
Headings All advertisements appear under appropriate headings
Copy date 4pm Tuesday prior to publication date.

Cancellation deadline 5pm Monday prior to publication date.
Display/Semi Display £16.20 per single column centimetre, min 30mm
Column width 42mm.
Whole Page £1620.00 (250mm x 180mm) Half Page £810.00
(125mm x 180mm) Quarter Page £405.00 (125mm x 88mm)
Box Numbers £3.00 extra Available on request.
All rates subject to standard VAT.

AGENTS

AGENTS REQUIRED

30% — Commission on sales OF FAST SELLING Medicinal & Vitamin Products already well known to CHEMIST and HEALTH FOOD STORES THROUGHOUT BRITAIN.
Monthly commission on all sales. Full promotional backing with big bonus terms.

Write: Miss C. Gorton-Moore, VITABIOTICS LTD, 122 Mount Pleasant, Wembley, Middlesex.

OVERSEAS OPPORTUNITIES

SUNNY SOUTH TENERIFE

Deluxe apartments and villas for sale on five star pebble beach within Amarillo Golf Complex.

Up to 60% mortgages available on these properties which are appreciating 20% per annum in value.

For further details ring:

NORTHWAY TRAVEL — 051-525 9397/8
Jerry Gould MPS

PRESCRIPTION LABELLING

QUALITY LABELS — DELIVERED IN 14 DAYS — OR NO CHARGE —

that's the



Phone: 051-708 8800
Park Printing,
41-43 Parliament Street,
Liverpool L8 5RN.
OFFER APPLIES TO U.K. MAINLAND ONLY

FINANCE

PRACTICE LOANS 1½% OVER BANK BASE RATE.

We do not believe that you, as a professional, should need to mortgage your home in order to finance a practice.

Under our schemes, loans are available over 25 years, and, in some cases even longer. Various repayment methods are available to suit your personal requirements.

For more information contact: —

Sleath

J.W. SLEATH & CO. LTD.,
Insurance and Mortgage Brokers
58 Theobalds Road
London WC1X 8BR
Telephone: 01-242 4375

John Richardson Computers Ltd



No1

- ▶ In Pharmacy Labelling
- ▶ In Auto-Order Stock Control
- ▶ In Customer Service
- ▶ In Systems Development

10% Discount to all NPA members

FREEPOST, Preston PR5 6BR Telephone: (0772) 323763

EQUIPMENT FOR SALE

FOR SALE KI5 MAGNUM MINI-LAB

3 years old, genuine reason for sale, full warranty and backing from manufacturers guaranteed. **Offers invited.**

TELEPHONE: Frank Boyes on Beaconsfield (04946) 3347

SITUATIONS WANTED

Due to early retirement

SALESMAN

with over 25 years experience of calling on chemists including Boots Chemists in South West Wales seeks agencies or position selling OTC lines.

Reply to: BOX C&D 3306

SHOPFITTINGS



0626 · 834077

COMPREHENSIVE DESIGN, MANUFACTURE AND
INSTALLATION SERVICE FOR THE RETAIL PHARMACY

KING CHARLES BUSINESS PARK, OLD NEWTON ROAD HEATHFIELD DEVON TQ12 6UT

TEAM INTERIOR DESIGN

SHOP, STORE AND OFFICE FITTERS

The complete designing and shopfitting service,
at low and competitive prices for the Chemist
& Druggist trade.

Call the TEAM to discuss your requirements.

Unit D, Stonebridge Court, Alfred Street South,
Nottingham NG3 2GY Tel: (0602) 483771

SHOPFITTINGS FOR SALE

FOR SALE

REFURBISHING NOTTING HILL

Shopfittings and Shelving. 4 Gondolas. Display
Units. Wooden Storage Shelves. Fridge,
bottles, screwcap containers, labels, etc.

£2,500

TEL: STAINES (0784) 62822

FOR SALE

Shop and dispensary fittings.
Good condition.

Offers to:
061-789 3011

STOCK FOR SALE

SUNGLASSES

SPECTACULAR OFFERS:

- Good Selection
- Good Value
- High Profits
- Low Low Prices!

Phone: Peter Grant
01-346 9714

STOCK FOR SALE

THE FILM MAN

DAVE ROTHWELL

110/12 Exposure	55 pence
110/24	from 65 pence
126/12	25 pence
126/24	from 40 pence
135/12	85 pence
135/24	from 70 pence
135/36	from £1.00
Disc	from 80 pence
HR100.120	£1.00
HR400.120	£1.50

FUJI SHEET PAPER

11" x 14" Lustre £17.00 per 100
30" x 40" Gloss or Lustre £25.00 per 20

FUJI ROLL PAPER

10" x 84m Lustre £30.00 per roll
16" x 84m Matt £48.00 per roll
30" x 84m Matt £90.00 per roll

Kodak, Fuji, Agfa & Polaroid films also supplied.

Paper for Minilabs supplied.

D. V. ROTHWELL LTD,
138 Westmorland Avenue, Blackpool FY1 5QW.
Telephone: 0253 697094
Car phone: 0836 504885

EEC IMPORTED

Pharmaceuticals
Carefully
selected range
of licenced
products

FOR
PRICE LIST
QUOTES

GENERAL ADVICE
PLEASE CONTACT
MERVYN GREEN MPS

EURIMPHARM LTD

UNIT A6, 83 COPERS COPE ROAD,
BECKENHAM, KENT BR3 1NR
TEL: 01 658 2255 TELEX 263832

LICENCED

P.I.'s
FOR HOME OR
EXPORT AT
COMPETITIVE
PRICES

MANY SPECIAL OFFERS THIS MONTH INCLUDING:

ZANTAC 150mg TABS

6679/0036

FELDENE 10mg CAPS

6679/0031

FELDENE 20mg CAPS

6679/0034

KODAK FILMS

For the best offers and
discounts, check our prices.

Tel: 01-724 7996

ABOUT PEOPLE

Fire destroys pharmacy

A fire has destroyed the Leeds premises of Mr Leslie Calvert, an NPA board member. Mr Calvert and his wife were in the pharmacy at 45 Upper Accommodation Road, when the fire started at about 11.00am on March 7.

He was alerted by "a singeing smell coming from the shop area" while making up a lotion in the dispensary. He looked out to see smoke coming from a shelf on a fixture at the rear of the shop. "The cause of the fire has not yet been established, but apparently it was not started by gas or electricity faults," Mr Calvert said.

Mr Calvert has been a board member of the NPA since 1978, and served as chairman from 1983-84. He is also the PSNC member for Yorkshire.

Numark/Rennie golf

The 1988 Numark chemist national golf tournament for the Rennie trophy will consist of seven regional finals at Ponteland and Prestwick. The grand final will be held at the El Paraiso golf course near Marbella at the end of October.

Any Numark member wishing to compete should write to Phil Duckworth at Numark central office, Warminster. The closing date is April 18.

To Wall Street

The Chairman of ICI, Denys Henderson, is the first representative of British industry to join the listed Company Advisory Committee of the New York Stock Exchange.

The committee provides a forum through which listed companies can participate in shaping policies of concern to the business community.

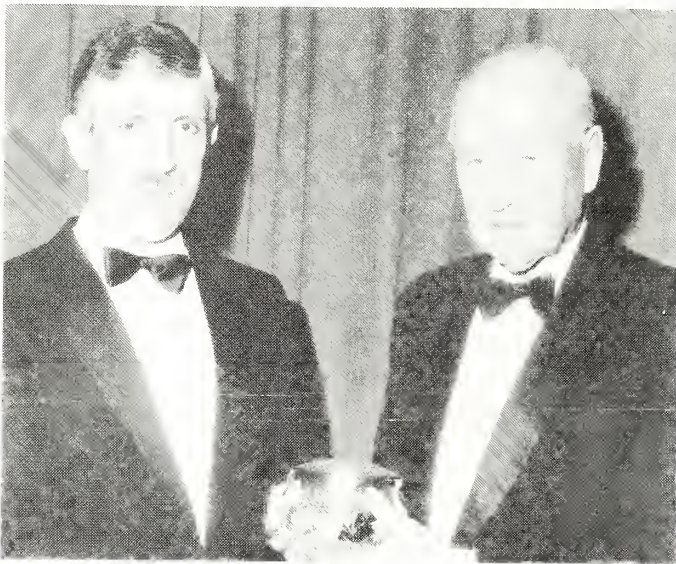
Golden service to Liverpool

Arthur Saul, who was proprietor of the Old Swan pharmacy in Liverpool for over 40 years until his retirement last year, has been given a cut glass rose bowl by the Liverpool Pharmaceutical Committee.

Jeffrey Max, chairman of the Committee made the presentation at their dinner, in appreciation of Arthur Saul's long service to Liverpool of over 50 years.

Mr Saul qualified in 1931 from

the Liverpool school of pharmacy where he studied under Humphrey Jones. His first post was at the Belmont Road hospital where he became chief pharmacist in 1940. He has been chairman of the Liverpool and District Guild of Pharmacists and president of the Liverpool Chemists Association, as well as chairman of the Liverpool branches of the NPA and the Pharmaceutical Society.



Adrienne's our answer to Eddie

Devon pharmacist Alan Haycocks has once again won a medal for Britain in the World Ski Cup for Pharmacists.

In Meiringen, Switzerland, last week he won a bronze medal in the giant slalom, with a combined time for two races of 3 minutes 22 seconds, a mere two seconds more than the fastest skier in his group. Mr Haycocks, who does locums in the South of England, has won several medals — including a gold — since he first competed in the World Cup in 1980.

Over 60 pharmacists from six countries took part this year. The only other British competitor was C&D's contributing editor, Adrienne de Mont, who tried to emulate Eddie Edwards by coming second out of two in the cross-country and sixth out of six in the slalom and giant slalom.

Next year the World Ski Cup will be held in Val d'Isere, France, probably in March. Pharmacists interested in taking part or watching should contact Madame Dominique Lecaillon, 15 Rue Armonville, F-51100 Reims, France.

"What points should you stress when selling a hot water bottle?" "List the main components of a balanced diet."

By correctly answering these questions and others Miss Elizabeth Milne, who works for Spence & Fowler, Aberdeen, earned a certificate of merit from Merrell Dow Pharmaceuticals. She recently completed the NPA's training course for pharmacy assistants and her work was said to be outstanding. Miss Milne is seen receiving her certificate from Mr P. Sheenan, retail sales manager. Also pictured are Mr Blacklaw, MPS, and Miss K. Ferguson, territory representative

HOW TO TURN CALCIUM INTO CASH

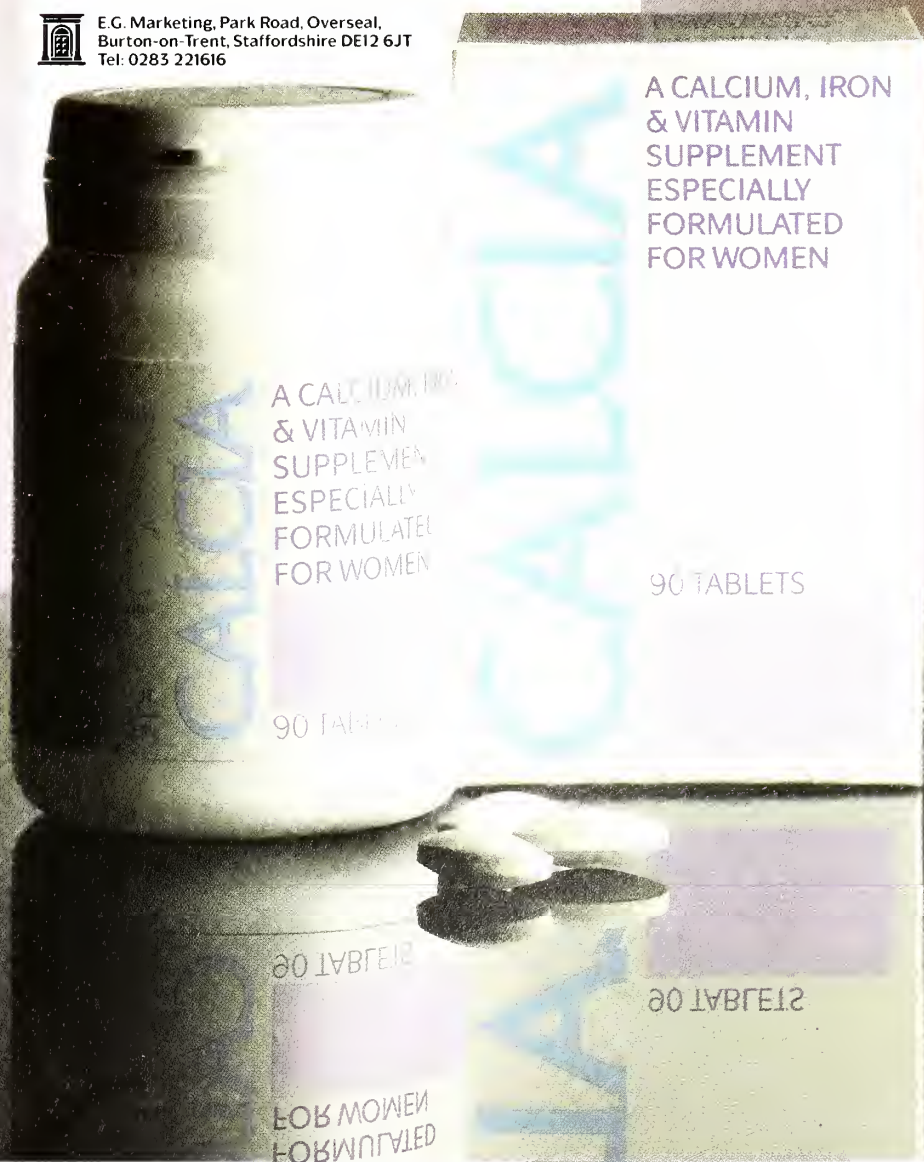
Today, more than ever, women are aware of the importance of calcium in their diets. And if there is one product that has spearheaded this awareness, that product is Calcia.

Well developed, well marketed and well promoted, Calcia has proved itself a winner.

You can't afford not to stock it.



E.G. Marketing, Park Road, Overseal,
Burton-on-Trent, Staffordshire DE12 6JT
Tel: 0285 221616



MORE STOCKING, LESS STOCK

SETON^{*}
COMFIGRIP
COMPRESSION HOSIERY
THIGH LENGTH STOCKINGS CLOSED TOE 1 PAIR

CONFORMS TO DRUG TARIFF SPECIFICATION No. 40

To make your life simpler, Seton Healthcare introduce Comfigrip, a new range of compression hosiery combining medically effective support with even greater comfort.

From the 1 April, Drug Tariff specification number 40 defines new compression hosiery classes I, II, and III to provide light, medium and strong support.

Available in both Below Knee and Thigh Length styles, the compact Comfigrip range is specially designed to meet your customers individual needs.

The range includes all three classes in a variety of sizes, and comes in a fashionable shade and attractive packaging.

Add the endorsement of Seton Healthcare, makers of Tubigrip, and you and your customers have the ultimate reassurance of quality.

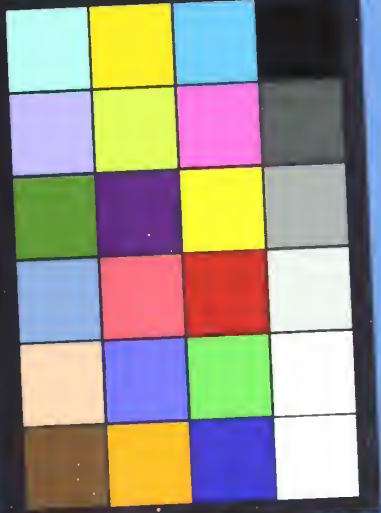
Seton Comfigrip. More Sales, Less Stock

 **Seton
Healthcare Group**

Tubiton House, Oldham OL1 3HS, England.
Tel: 061 652 2222 Telex: 669956 Fax: 061 626 9090

APRIL2013

24ColorCard CameraCray.com



RIGHT

彩照

姓名:
Name:

职务:
Post:

单位:
Unit

No:

Date:

002

敬德安公司

HUAJIE H.3201
华夏兄弟

20

19

18

17

16

15

14

13

12

11

10

9

8

7

6

5

4

3

2

1

0

cm

inch

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

